

Board Officers:

Commissioner Hoffmaster (Chair) Commissioner Matthew (Vice-Chair)

BOARD OF HEALTH Meeting Agenda for December 12, 2024 at 9:00 AM

1. Call to Order

- a. Opening ceremonies Pledge Allegiance to the Flag of the United States of America
- b. Roll Call
- c. Approval of the Agenda*
- d. Approval of the Minutes from November 14, 2024*

2. Public Comment

- 3. Health Officer's Report pg 6
- 4. Medical Director's Report pg 10

5. Departmental Reports

- a. Personal Health & Disease Prevention pg 12
- b. Health Education & Promotion pg 19
- c. Environmental Health pg 22
- d. Area Agency on Aging pg 33

6. Financial Reports

- a. Approve Payments* pg 34
- b. Review Financials* pg 37

7. Committee Reports

- a. Finance Committee Approval of the December 2, 2024 Finance Committee meeting. pg 40
- b. Program, Policies, and Appeals Approval of the December 4, 2024 Program, Policy, and Appeals Committee meeting. pg 41

8. Unfinished Business

a.

9. New Business

- a. FY24-25 Budget Amendment #1* pg 42
- b. Wage Scale* pg 58
- c. 2025 BOH Meeting Schedule* pg 63
- d. Personnel Policy Manual* pg 64

10. Tabled Items

a. Hillsdale Water Softener

11. Public Comment

Public Comment:

For the purpose of public participation during public hearings or during the public comment portion of a meeting, every speaker prior to the beginning of the meeting is requested but not required to provide the Board with his or her name, address and subject to be discussed. Speakers are requested to provide comments that are civil and respectful. Each speaker will be allowed to speak for no more than three (3) minutes at each public comment opportunity.

12. Adjournment - Next meeting: January 23, 2025

Upcoming Education Opportunities Offered After BOH Meeting:

• November

Upcoming Meeting Dates:

- January 17, 2025 @ 9:00 AM Finance Committee (Hoffmaster, Houtz, & Lanius)
- January 15, 2025 @ 8:30 AM PPA Committee (Matthew, Leininger, Baker)
- January 23, 2025 @ 9:00 AM Full Board Meeting



November 14, 2024 – Board of Health Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health meeting was called to order by Chair, Jared Hoffmaster at 9:00 AM with the Pledge of Allegiance to the Flag of the United States. Roll call was completed as follows: Tom Matthew, Jared Hoffmaster, Jon Houtz, Brent Leininger, and Steve Lanius. Rusty Baker was absent.

Also present from BHSJ: Rebecca Burns, Dr. Karen Luparello, Theresa Fisher, Laura Sutter, Joe Frazier, and Heidi Hazel.

Mr. Leininger moved to approve the agenda, with an addition to add approval of Health Officer evaluation to the old business session. The motion received support from Mr. Houtz. The motion passed unopposed.

Mr. Houtz moved to approve the minutes from the October 3, 2024 meeting with support from Mr. Leininger. The motion passed unopposed.

Public Comment: No public comments were given.

Rebecca Burns, Health Officer, reviewed the monthly Health Officer's Report with the following items included: Medical Insurance Renewal, PA 152 Annual Board Decision, Respiratory Virus Season, Environmental Health Eloctronic Application Portal, Staffing Update, Kindergarten Oral Health Assessment, Community Needs Assessment by Beacon Health System, Michigan Legislation, Public Health Concerns, Coldwater Office, Hillsdale Office, Three Rivers Office, Sturgis Office, and Board Education.

Dr. Luparello reviewed the Medical Director's monthly report. This month's educational report was titled, "Family Planning Contraception Options MDHHS – Plan First Take Control of Your Birth Control".

Departmental Reports:

- o Health Education & Promotion
- o Environmental Health
- Area Agency on Aging
- Personal Health & Disease Prevention

Financial Reports/Expenditures

- o Mr. Leininger moved to approve the expenditures for September and October with support from Mr. Matthew. The motion passed unopposed.
- Mr. Leininger moved to place the financials for September on file with support from Mr. Lanius. The motion passed unopposed.

Committee Reports:

- Finance Committee Mr. Lanius moved to approve the minutes from the November 4, 2024
 Board of Health Finance Committee meeting with support from Mr. Matthew. The motion passed unopposed.
- o Program, Policy, & Appeals Committee Did not meet.

Unfinished Business:

o Mr. Leininger moved to approve the Heath Officer's evaluation, with support from Mr. Houtz. The motion passed unopposed.

New Business:

- Mr. Leininger moved to table the Hillsdale water softener, with support from Mr. Lanius.
 The motion passed unopposed.
- o Mr. Leininger moved to approve the hard cap figures according to PA 152, set at \$7718.26 for a single person, \$16,141.28 for two persons, and \$21,049. 85 for a family. The motion received support from Mr. Houtz and passed unopposed.
- Mr. Leininger moved to approve the proposed employer sponsored Blue Cross / Blue Shield health insurance plans, PPO \$1,500 80%, HSA \$2,000 80%, HSA \$3,500 80%, HSA \$6,350 100% plan, and Delta dental and Principal vision plans as presented, with support from Mr. Lanius. The motion passed unopposed.

Public Comment: No public comments were given.

With no further business, Mr. Leininger moved to adjourn the meeting with support from Mr. Matthew. The motion passed unopposed and the meeting was adjourned at 10:15 AM.

Respectfully Submitted by:

Administrative Services Director

Secretary to the Board of Health

PUBLIC COMMENT

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Health Officer's Report to the Board of Health for December 12, 2024 Prepared by: Rebecca A. Burns, M.P.H., R.S.

Agency Updates

Thanking our Board of Health: As the two-year appointment of BOH members concludes this month, I want to express my appreciation of your service to Public Health. We look forward to continuing to work with those of you who will be reappointed and wish those of you moving on to new opportunities the best.

Budget Amendment #1 & Salary Adjustment Proposal: Prepared by Theresa for action at today's meeting is budget amendment #1. This budget takes into account all known and expected revenue at this point in the fiscal year. The budget amendment is balanced and plans for a 5% salary adjustment for the staff. A 5% adjustment is recommended after a review of wage studies which show our agency lagging behind other local health departments and a consideration of the inflation rate. There is projected use of fund balance in the budget of \$310,000.

Personnel Policy Updates: The Personnel Policy committee has reviewed and suggested changes to the policies. These changes were reviewed by the Agency's attorney; Andrew Brege so the document before you for approval is accepted by him. Mr. Brege did provide language for the expected change coming to sick leave requirements in mid-February. The PPA committee has decided to move the Personnel Policies forward for adoption with the exception of the sick leave piece at this time. The BOH will need to review the status of the sick leave requirement after the end of this legislative session and potential adopt changes at the January meeting.

Board of Health Meeting Schedule for 2025: The proposed meeting schedule for 2025 is provided. We are recommending that the committee meetings be cancelled for January due to the change over of the BOH members and as committee appointments have not been made until the full meeting in January. Business at the January meeting includes at least the annual bylaws review, committee appointments, employee recognitions, and audit governance letter.

Open Enrollment: The agency is currently conducting "open enrollment" for benefits for calendar year 2025. Our insurance provider, AleraGroup, has made an electronic benefit election system available which allows staff to establish a login and then use the system to elect their choices. The agency also offered staff the opportunity to participate in a meeting with the insurance provider in each office, and if they missed it, a video to watch so that they had information about the process and choices. Representatives from AleraGroup are also available by phone call to assist staff with any questions.

Respiratory Virus Season: BHSJCHA continues to encourage all residents to receive the flu and COVID vaccines. Some residents will also benefit from the vaccine targeted at preventing RSV. Residents are encouraged to talk with their Provider about which vaccines are recommended for them or they can contact our agency and speak with one of our nurses.

Environmental Health Electronic Application Portal: The portal should be live on our website by the date of the meeting. We are soft-launching with plans after the first of the year to share about this new option for making an application via a press release and social media posts.

Staffing Update: Personal Health & Disease Prevention: We are looking for a Mobile Nurse and part-time Communicable Disease Nurse. A part-time Hearing & Vision Tech position is also posted.

Area Agency on Aging: Is seeking a nurse case manager.

Community Health Needs Assessment by Beacon Health System: Beacon has wrapped up the process. They are now working with partners to address the needs of the community. We are currently involved in a grant from Beacon focused on community needs identified in the Agency's CHNA. This grant wraps up at the end of December and Kris with her team will be reporting out in January.

Michigan Legislation: MALPH (Michigan Association for Local Public Health) continues to follow legislation in the "lame duck" session. Testimony was given at the senate hearing regarding the on-site sewage bills; SB 299 and SB 300.

Billing for Community Health Worker Services: I was able to take advantage during an MDHHS/Local Partner Update that Director Hertel attended to share that our billings from local public health for CHW services are being denied. An MDHHS staffer is now collecting information from us and working with Medicaid on the denials. I am hopeful for resolution.

Public Health Concerns:

Pertussis: Pertussis is common in the United States and while it can cause serious illness in people of all ages, it is most dangerous to infants. Cases of pertussis in Michigan continue to be high. Pertussis is a vaccine preventable disease. We continue to see declining childhood immunization rates leaving more infants and children at risk for severe pertussis illnesses.

Human Arbovirus Illnesses: I'm including the arbovirus activity weekly summary for December 6th in my report today. With a return to winter, mosquito and tick activity will pause until the weather warms.

Coldwater Office: Administrator Norman is retiring and Theresa and I will be meeting the new incoming administrator in another week. The HVAC upgrade in Coldwater will go forward in the Spring so that we don't have days without heat in the building over the winter. I have also been informed that the restroom upgrades to the Coldwater building will happen in the new year.

Hillsdale Office: I am collecting additional information regarding the water softener that was discussed last month. I expect to have that information for the January meeting. I shared with the Finance Committee the bid we received for the insurance claim on the Hillsdale lower level water damage repair. The bid has been provided to the insurance company.

Sturgis: I have been talking with floor installer about a date/time to repair a popped floor tile in the new area of the suite. The landlord is aware.

Three Rivers Office: We are having an electrician replace ventilation fans in two restrooms. There is also a plumber coming out to replace a broken valve on a water line in the maintenance room.

Board Education: Is completed for the year and will restart after the new year.

Arbovirus* Activity, Including West Nile Virus and Eastern Equine Encephalitis:

Weekly Summary, Michigan 2024

*Arboviruses are viruses transmitted by mosquitoes or other insects

167

Mosquito pools testing

positive for arbovirus

infection

132

Animals testing positive for arbovirus infection

36

Updated: December 6, 2024

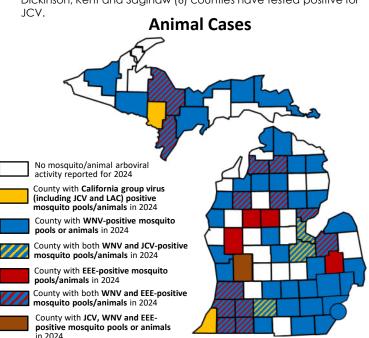
Human cases of West Nile virus or other arboviruses reported

Highlights

- Thirty-one residents of Berrien, Calhoun, Delta, City of Detroit, Eaton, Genesee (3), Ingham, Jackson (3), Kent, Lapeer, Lenawee, Livingston, Macomb(6), Midland, Monroe, Oakland (4), St. Clair and Wayne (2) counties have been sickened by West Nile virus (WNV).
- Five residents from Alpena, Eaton, Houghton, Livingston and Wayne counties have tested positive for Jamestown Canyon Virus (JCV).
- Thirteen horses from Allegan, Cass, Clare, Kalamazoo, Lapeer, Menominee, Osceola (2), St. Joseph, Tuscola, Van Buren (2) and Wexford counties and five birds from Antrim, Marquette, Newaygo, Otsego, and Roscommon counties have tested positive for Eastern equine encephalitis virus (EEEV).
- Eight horses from Eaton (2), Kalamazoo, Kent, St. Joseph, Tuscola, Van Buren and Washtenaw counties and 106 birds from Alger, Allegan, Alpena, Antrim (3), Bay (6), Branch (3), Calhoun, Cass (2), Cheboygan, Chippewa, City of Detroit, Crawford, Delta (3), Eaton (4), Emmet, Genesee, Grand Traverse (5), Gratiot, Ingham, Iosco, Iron (2), Isabella, Jackson (3), Kalamazoo (3), Kalkaska (2), Kent (2), Lenawee, Livingston (2), Luce (3), Macomb (2), Manistee, Marquette (2), Mason, Menominee (4), Monroe, Montmorency, Muskegon (2), Oakland (9), Ogemaw, Ontonagon, Otsego (2), Ottawa, Roscommon (3), Saginaw (8), St. Clair, Tuscola, Van Buren, Washtenaw (4), Wayne and Wexford counties have tested positive for WNV.
- Three mosquito pools from Arenac, Cass and Kent counties have tested positive for EEEV.
- 150 mosquito pools from Arenac (2), Bay (79), Calhoun, Huron, Iosco, Jackson, Kent (27), Macomb (4), Oakland, Ottawa (2), Saginaw (12), St. Clair (12), Washtenaw (6) and Wayne counties have tested positive for WNV.
- Fourteen mosquito pools from Bay (3), Berrien (2), Calhoun, Dickinson, Kent and Saginaw (6) counties have tested positive for

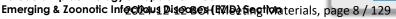
2024 Michigan Arbovirus Surveilla	nce
Total Number of Mosquito Pools Tested	6,129
Total Number of Mosquitoes Tested	92,636
Positive Mosquito Pools	167
WNV-positive pools	150
EEEV-positive pools	3
JCV-positive pools	14
Animal Arbovirus cases	132
WNV-positive animals	114
EEEV-positive animals	18
Human Arbovirus cases	36
WNV human cases	31
JCV human cases	5

No human WNV or other arboviral cases reported for 2024 County with human WNV case(s) in 2024 County with human JCV case(s) in 2024 County with human JCV case(s) in 2024











Preventing Mosquito Bites and Arboviruses:

Tips for Michigan Residents

The most effective way to avoid arboviruses is to prevent mosquito bites. Be aware of the West Nile virus and other arbovirus activity in your area and take action to protect yourself and your family.



Use Insect Repellent

Use Environmental Protection Agency (EPA)-registered insect repellents with one of the active ingredients below. When used as directed, EPA-registered insect repellents are proven safe and effective, even for pregnant and breastfeeding women.

- DEET
- Picaridin
- IR3535

- Oil of lemon eucalyptus (OLE) or para menthane-diol (PMD)
- 2-undecanone

Find the insect repellent that's right for you by using EPA's search tool



Tips for Babies & Children

- Always follow instructions when applying insect repellent to children.
- Do not use insect repellent on babies younger than 2 months old.
- Do not apply insect repellent onto a child's hands, eyes, mouth, and cut or irritated skin.
 - Adults: Spray insect repellent onto your hands and then apply to a child's face.
- Do not use products containing oil of lemon eucalyptus (OLE) or para-menthanediol (PMD) on children under 3 years old.



Take steps to control mosquitoes inside and outside your home

- Use screens on windows and doors. Repair holes in screens to keep mosquitoes outside.
- Once a week, eliminate potential breeding areas for mosquitoes. Check inside and outside your home. Mosquitoes lay eggs on or near water:
 - Discard old tires, tin cans, ceramic pots or other containers that can hold water
 - Repair failed septic systems
 - Drill holes in the bottom of recycling containers left outdoors
 - Keep grass cut short and shrubbery trimmed
 - Clean clogged roof gutters, particularly if leaves tend to plug up the drains
 - Frequently replace the water in pet bowls
 - Flush ornamental fountains and birdbaths periodically; aerate ornamental pools, or stock them with predatory fish.

For Up-to-Date Information Visit Michigan's Emerging Diseases Website www.michigan.gov/westnile

or the Centers for Disease Control and Prevention Website www.cdc.gov/west-nile-virus/

MEDICAL DIRECTOR'S REPORT

December 2024

- 1. Watching numbers of communicable diseases.
- 2. Director and Administrator meetings, in person and zoom.
- 3. Meetings via zoom and teleconference with several associations.
- 4. TB sub committee of physician public health group meetings.
- Continuing treatment of multiple latent TB patients and one several active TB patients.
 Utilized state consultant multiple times for active TB patients.

Differences Between Latent TB Infection and TB Disease

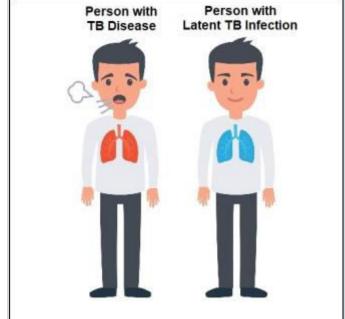
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Persons with Latent TB Infection (LTBI):

- Do not feel sick
- Do not have any symptoms
- Cannot spread TB bacteria to others
- · Can have latent TB infection for years
- Are at risk for developing TB disease
- Have a small amount of TB germs in their body that are alive but inactive
- Usually have a positive TB blood test (interferon-gamma release assay [IGRA]) or TB skin test (Mantoux tuberculin skin test [TST]) result indicating TB infection
- Should consider treatment for LTBI to prevent TB disease

Persons with TB Disease:

- Usually feel sick
- Usually have one or more symptoms
- May be able to spread TB bacteria to others
- Have a large amount of active TB germs in their body
- Usually have a positive TB skin test or TB blood test result indicating TB infection
- Need treatment for TB disease



bleotosppeaaldTBblaateeiaatecottleessPersons with



Personal Health and Disease Prevention: December 12th, 2024 Heidi Hazel, BSN, RN

Communicable Disease:

Here are some highlights from our regional Epi's.

- Visits to Emergency Departments or Urgent Care centers for RSV symptoms continue to fluctuate, remaining at low levels.
- Flu activity reported to the Michigan Disease Surveillance System (MDSS) remains low and consistent with previous years. Nationwide, two influenza-associated pediatric deaths have been reported this flu season, but no such deaths have been confirmed in Michigan by MDHHS.
- COVID-19 cases are currently fluctuating at low levels, lower than those observed at the same time last year.
- Link to Seasonal Respiratory Virus Dashboards. https://www.michigan.gov/mdhhs/keep-mi-healthy/chronicdiseases/seasonal-respiratory-viruses
- On October 19th, the CDC released its <u>2024-2025 Respiratory Disease Season Outlook</u>, forecasting that the upcoming fall and winter season will likely see similar or lower peak hospitalizations from COVID-19, influenza, and RSV compared to last season.
- On October 18th, <u>CDC issued information about increased reports of M. pneumoniae</u> in young children.
- Pertussis activity remains high in Michigan and across the nation. Between 2017-2019, Michigan saw an average of 596 cases annually. As of October 22nd, 723 cases have been reported to the Michigan Disease Surveillance System (MDSS) this year alone. Although pertussis is a vaccine-preventable disease, declining childhood immunization rates have increased the risk of severe illness. In Michigan, 82.9% of children receive their first dose of the DTaP vaccine by three months of age. However, only 6.6% of 19-month-olds have completed the full four dose series.

IMMUNIZATIONS

In October we administered a total of 1,060 vaccines across all three counties. This included nine offsite clinics, which featured a home visit and a flu clinic.

HIV/STI's

To promote sexual health and safety, each office will have pre-packaged condoms available for clients. These will be conveniently placed in a box in each bathroom, allowing individuals to access them discreetly without needing to make a request. Our goal is to make condoms more accessible in order to help reduce the spread of STIs within our community.

Women, Infant, and Children (WIC):

Attached you will find the most recent document that the state WIC office provides for us on "WIC Participation and Food Costs Spent by WIC participants" for FY 2024. You will see a 3-year analysis from 2022 to 2024. This document represents the impact (in dollar terms) of the WIC program in our communities.

<u>Children's Special Health Care Services (CSHCS), Hearing/Vision and KOHA:</u> CSHCS:

CSHCS has been training our new RN, Amanda Okeke, following the retirement of our experienced nurse, Madonna Hilarides. Amanda is adapting quickly and will be a valuable addition to our team.

HEARING AND VISION:

Our part-time technician from Branch County resigned in October, and we are currently seeking a replacement.

KOHA:

Angela has been training with the hygienist from the Van Buren/Cass Health Department and meeting with superintendents in each county to educate them about the program. She has also been working diligently to schedule the schools, coordinating with staff to ensure all locations are arranged and prepared for the program's implementation.

Staffing update: We recently filled three positions in the Three Rivers Office, including two part-time WIC clerks and a Breastfeeding Peer. Currently, we have an open part-time position in Hearing and Vision, as well as an open part-time position for a Communicable Disease Nurse. The Mobile Unit RN position also remains vacant.

Branch - Hillsdale - St. Joseph Community Health Agency Personal Health and Disease Prevention

		Oct	:-24		FYTD 2024-2025 (Oct-Sept)			Sept)	FYTD 2023-2024 (Oct-Sept)			
Confirmed & Probable Case Totals	BR	HD	SJ	Total	BR	HD	SJ	Total	BR	HD	SJ	Total
Animal Bite/Rabies potential exposure	2	4	-	6	2	4	-	6	1	6	1	8
Blastomycosis	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis	-	-	-	-	-	-	-	-	-	-	-	-
Campylobacter	2	-	2	4	2	-	2	4	2	2	1	5
Chicken Pox	-	-	-	_	-	-	-	-	-	-	-	-
Chlamydia	6	9	25	40	6	9	25	40	9	5	15	29
Coccidioidomycosis	-	-	-	_	-	-	-	-	-	-	-	-
CRE Carbapenem Resistant Enterobac.	-	-	-	-	-	-	-	-	1	-	1	2
Creutzfeldt-Jakob Disease	-	1	-	1		1	-	1				
Cryptosporidiosis	-	-	-	-		-	-		-	-	-	-
Giardiasis	-	-	1	1		-	1	1	-	2	-	2
Gonorrhea	1	2	5	8	1	2	5	8	3	-	6	9
H. Influenzae Disease - Inv.	-	1	-	1	-	1	-	1	-	-	-	-
Hepatitis B - Acute	-	-	-	-	-	-	-		-	-	-	-
Hepatitis B - Chronic	-	-	-	-	-	-	-	-	-	-	-	-
Hepatitis C - Acute	-	-	-	-	-	-	-	-	-	-	-	-
Hepatitis C - Chronic	-	-	3	3	-	-	3	3	-	2	2	4
Hepatitis C Unknown	-	-	ı	-	-	-	-	-	-	-	-	-
Histoplasmosis	-	-	-	-	-	-	-	-	1	-	1	2
HIV/AIDS	1	-	ı	1	1	-	-	1	1	-	-	1
Influenza	-	-	3	3	-	-	3	3	1	-	7	8
Kawasaki	-	-	-	-	-	-	-	1	-	-	-	-
Legionellosis	-	-		-	-	-	-		-	-	-	-
Listeriosis	-	-	-	-	-	-	-		-	-	-	-
Lyme Disease	1	1	2	4	1	1	2	4	-	-	2	2
Measles	-	-	-	-	-	-	-	-	-	-	-	-
Menengitis - Aseptic	-	1	-	1	-	1	-	1	-	-	-	-
Menengitis - Bacterial	1	-	-	1	1	-	-	1	-	-	1	1
Meningococcal Disease	-	-	-	-	-	-	-	-	-	-	-	-
Mumps	-	-	-	-	-	-	-	-	-	-	-	-
Mycobacterium - Other	3	-	-	3	3	-	-	3	1	1	-	2
Norovirus	-	-	-	-	-	-	-	-	-	-	-	-
Novel Coronavirus	20	39	14	73	20	39	14	73	81	47	58	186
Pertussis	1	2	-	3	1	2	-	3	-	-	-	-
Salmonellosis	-	-	-	-	-	-	-	-	3	-	-	3
Shiga Toxin-prod. (STEC)	-	-	-	-	-	-	-	-	-	1	-	1
Shigellosis	-	-	-	-	-	-	-	-	-	-	-	-
Shingles	-	-	-	-	-	-	-	-	-	-	-	-
Staphylococcus Aureus Infect.	-	-	-	-	-	-	-	-	-	-	-	-
Strep Invasive Gp A	-	-	-	-	-	-	-	-	1	-	-	1
Strep Pneumonia Inv Ds.	-	-	-	-	-	-	-	-	1	1	2	4
Syphilis - Primary	-	-	2	2	-	-	2	2	-	-	-	-
Syphilis - Secondary	1	-	1	2	1	-	1	2	-	-	-	-
Syphilis To Be Determined	-	2	2	4	-	2	2	4	-	1	-	1

Branch - Hillsdale - St. Joseph Community Health Agency Personal Health and Disease Prevention

			Oct-24				YTD	2024-20	25		YTD 2023-2024			24	
	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total
CHILD IMMUNIZATIONS															
# Vaccines Given CHA	1,040	487	-	1,094	2,621	1,040	487	-	1,094	2,621	200	202	140	89	631
All VFC Doses Given	201	246	157	135	739	201	246	157	135	739	1,071	542	-	954	2,567
Waivers	32	38	3	24	97	32	38	3	24	97	57	35	-	31	123
ADULT IMMUNIZATIONS		1	1	1		ı	ı	,	ı		1	1			
# Vaccines Given	42	37	-	5	84	42	37	-	5	84	192	31	4	62	289
All AVP Doses Given	199	57	14	51	321	199	57	14	51	321	28	76	-	8	112
COMMUNICABLE DISEASE															
TB Tests Done	2	10	-	6	18	2	10	-	6	18	7	9	-	2	18
STD treatments	2	2	-	7	11	2	2	-	7	11	2	4	-	28	34
HIV Testing	-	4	-	11	15	-	4	-	11	15	-	-	-	7	7
ENROLLMENTS															
Medicaid & Michild	1	-	-	-	1	1	-	-	-	1	2	1	-	-	3
REFERRAL SERVICE															
MCDC Referrals	6	4	10	18	38	6	4	10	18	38	13	-	16	2	31
MIHP referrals	-	-	69	80	149	-	-	69	80	149	2	-	18	18	38
Hearing Screens															
Pre-school	199	82	-	36	317	199	82	-	36	317	35	29	-	27	91
School Age	106	279	619		1,004	106	279	619	-	1,004	133	374	-	450	957
Vision Screens															
Pre-school	189	80	-	23	292	189	80	-	23	292	75	15	-	24	114
School Age	121	459	-	544	1,124	121	459	-	544	1,124	391	466	-	649	1,506
Children's Special Health Care So	ervices					·	·			·			•		·
Diagnostics	2	-	-	-	2	2	-	-	-	2	6	1	-	-	7
Assessments-Renewal	21	35	-	37	93	21	35	-	37	93	22	34	-	37	93
Assessments-New	9	9	-	5	23	9	9	-	5	23	6	3	-	6	15

2024 - 2025 Caseload [1] Management Report

LA #: 12

Name: Branch-Hillsdale-St. Joseph Community Health

State Participation/Enrollment Ratio [2]:

Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Curr Year P/E Ratio (last 12 months)
94.9%	95.3%	95.6%	96.3%	94.0%	94.4%

Months	Enrollment [3]	Initial	Closeout Participation	% Change in	Participation/
		Participation [4]	[5]	Particiption [6]	Enrollment Ratio[2]
Oct / 2023	4,263	3,999	4,039		93.81%
Nov / 2023	4,252	3,953	4,007	-0.79%	92.97%
Dec / 2023	4,201	3,849	3,931	-1.90%	91.62%
Jan / 2024	4,262	3,916	3,989	1.48%	91.88%
Feb / 2024	4,269	3,953	3,997	0.20%	92.60%
Mar / 2024	4,271	3,941	3,997	0.00%	92.27%
Apr / 2024	4,305	3,984	4,024	0.68%	92.54%
May / 2024	4,316	3,959	3,992	-0.80%	91.73%
Jun / 2024	4,333	3,929	4,006	0.35%	90.68%
Jul / 2024	4,390	4,029	4,075	1.72%	91.78%
Aug / 2024	4,412	4,054	4,096	0.52%	91.89%
Sep / 2024	4,389	4,067	4,110	0.34%	92.66%
Oct / 2024	4,448	4,160	4,160	1.22%	93.53%
Nov / 2024	0	0	(est[7]) 0		
Dec / 2024	0	0	(est[7])		
Jan / 2025	0	0	0		
Feb / 2025	0	0	0		
Mar / 2025	0	0	0		
Apr / 2025	0	0	0		
May / 2025	0	0	0		
Jun / 2025	0	0	0		
Jul / 2025	0	0	0		
Aug / 2025	0	0	0		
Sep / 2025	0	0	0		
Total (Year to date)	4,448	4,160	4,160		
Curr Year Avg	4,448	4,160	4,160	100.00%	92.30%
Months with Count	1	1	1	1	1
Average to Base %[8]		0.0%	0.00%		
Last yrs Base % [9]		106.7%	108.12%		
Last yrs Average	4,305	3,969	4,022		92.20%

Estimated average participation for current year to date:

Actual average monthly participation current year to date [10]:

4,160 4,160 T **Funding Allocation Information**

Total Funding Allocation: \$0

Assigned Funding Participation Count [11]:

Current Yr Base:

Previous Yr Base:

3,720

0

Date Generated: 12/02/2024

- [1] Caseload: The term used to refer to the number of clients being served in a given time. This is comprised of both enrollment and participation.
- [2] Participation/Enrollment Ratio: The number of clients participating divided by the number enrolled.
- [3] Enrollment: Number of clients certified to receive benefits in the given month. Final counts available for the month that just ended.
- [4] Initial Participation: Number of clients receiving benefits at the beginning of the month. Comparison between this and the closeout participation is indicative of the number of participants added over the course of the month. This can be used to inform staff of participation numbers at the start of the month and enable them to proactively improve participation before it is finalized.
- [5] Closeout Participation: Final number of clients who received benefits for the given month. Finalized approx. 5 weeks after the month ends.
- [6] % Change in Participation: The % difference in closeout participation when compared to the previous month.
- [7] est: It is the estimated participation for the given month. This is available prior to the closeout participation being available. It is a calculated value based on prior months' participation. NOTE:Last two non 0 values are "Estimates"
- [8] Average to Base %: Compares the current year average participation to the current year base.
- [9] Last yrs Base %: Compares last year's average participation to the last year base.
- [10] Actual Avg. Part. For current year to date: It is an average that includes the participation counts for all months in the current year where participation has been finalized.
- [11] Assigned Funding Participant Count: The value used in the calculation to determine the funding allocated to the local agency for the fiscal year. For additional details, refer to your agency's annual funding allocation letter.

Date Generated: 12/02/2024



WIC Participation and Food Costs: Branch-Hillsdale





DECEMBER 2024

HEALTH EDUCATION & PROMOTION BOARD OF HEALTH REPORT

Included in This Month's Report:

- 1. HEP Update
- 2. Community Health Worker (CHW) Program Update
- 3. Community Events
- 4. Social Media Update

1. Health Education & Promotion Department Update:

The Michigan Office of Highway Safety and Planning grant is on target with the deliverables for the grant. Since the last Board of Health meeting, our team has met with the state's public relations/advertising agency to discuss the upcoming marketing campaign and met with our project manager to provide our monthly update. The next Advisory Committee meeting is Friday December 6th. Josh has sent letters to area Bishops and has scheduled community meetings in each county for the week of December 16th. We met with the Trauma Coordinator and Injury Preventionist at Bronson Methodist Hospital the week of December 2nd and they are interested in working with us. We are also reaching out to invite representatives from the hospitals to join the advisory group.

Beacon Health has completed their Community Health Needs Assessment. They will be focusing their Health Improvement Plan for the coming 3-year cycle on activities to support access to providers. Our partnership in the area of mental health services and maternal/infant health projects supporting our agency's CHIP continue. The marketing campaign on Facebook, Spotify, Pandora, and Hulu promoting the WIC program and Immunizations resulted in 16,459 individuals and 85,788 impressions during November. The incentive program for WIC clients who re-certify in the program will continue until December 31, 2024. The distribution of baby bags to birthing families in St. Joseph County also continues.

The agency will hold the first planning committee meeting on Friday December 6th for the Hillsdale County Opioid educational activity. We have invited a cross-section of individuals from Hillsdale County to participate and are looking forward to working on this project. More information will be provided as we move forward.

The Michigan Medical Marijuana Grant applications were released. They are due to the state by January 1, 2025 at 11:59 p.m. Our team will be contacting the administrators in each county to complete the application process prior to the Christmas holiday. Anticipated distributions for each county are as follows: Branch - \$19,731, Hillsdale - \$11.099 and St. Joseph - \$8,468. All three counties will see an increase in available funds. We have begun reaching out to potential partners and planning the tactics we will use in 2025.

The Annual Agency All-Staff Meeting is scheduled for April 25, 2025. It will be held at the ProMedica Conference Center in Coldwater. Board of Health members are invited to join us on that day. Tentatively, the agenda includes Quality Improvement project milestones,

There were 7 news stories mentioning the agency in November including print and radio. The Environmental Health team completed interviews on WTVB in Branch County, WBET in St. Joseph County and WCSR in Hillsdale County to share information on food safety for Thanksgiving.

Social Media continues to spread our message to the community. In November we covered the following topics:

DECEMBER 2024

HEALTH EDUCATION & PROMOTION BOARD OF HEALTH REPORT

- Thanksgiving Food Safety Tips (Radio/Website/Social Media Promotion)
- Game time food safety tips
- Breastfeeding support group survey
- November WIC toolkit shared
- National COPD awareness month
- Diabetes prevention tips
- Winter weather safety tips
- National Caregiver Month- AAA services and support groups shared to social media/lobby TVs
- Home for the Holidays (Scams)/ <u>Common Scams that Target Elders</u> | <u>Branch Hillsdale St. Joseph Community Health</u>
 Agency
- Beacon Health Grant marketing for WIC and Immz. through platforms such as, Hulu, Meta(Facebook/Instagram), Sirius XM/Pandora and Spotify. Link to preview Spotify Adadsmanager.spotify.com/preview/29fbe796-63b9-4ce4-9145eebbf80f7a18?lang=en-US
- COVID-19 testing kits library and at home testing kits
- Whooping cough/Pertussis-TDAP and DTAP messaging
- Take Control of Your Birth Control messaging
- MDHHS Virtual Baby Fair
- Flu vaccination/prevention tips

Recalls shared:

- Carolina Prime Pet, Inc. Recalls "Hollywood Feed Carolina Made Chicken Chips" Because of Possible Salmonella Health Risk | FDA
- Sugar Foods Recalls Fresh Gourmet Tortilla Strips Santa Fe
 Style 3.5 Ounce Pouch Due to Undeclared Wheat | FDA

2. The Michigan Center for Rural Health (MCRH) – Embedding a Community Health Worker Program within the Local Public Health Department Grant:

Ali Salim has left the agency. During November, Lisa Redmond completed 21 face-to-face appointments. She also started working with Covered Bridge Healthcare 2 days per week to provide services to their clients in November.

The greatest needs requested were assistance with Medicaid applications, insurance options, assistance with home repairs, homelessness/risk of homelessness, and finding financial resources through MDHHS. Referrals to the program have increased and we continue to conduct outreach in the community.

3. Community Events: We have supported, participated, or will be participating in the following events:

Date	Event
11/5	Salvation Army Book Distribution – Hillsdale County
11/6	Presentation to Hillsdale County Early On Staff – Hillsdale County
11/7	Presentation to Coldwater Rotary – Branch
11/8	Friendship Friday – St. Joseph County
11/25	Coach Eby Center – Branch County
12/5	December to Remember – Branch County
12/9	King's Kupboard – Hillsdale County
12/12	Diaper Bank – St. Joseph County
12/23	Eby Center – Branch County

HEALTH EDUCATION & PROMOTION BOARD OF HEALTH REPORT

Ö	Soc	ial Media	Data (As	of December	1st, 2024)	
	# of Followers (Facebook & Instagram)	Instagram Reach (Amount a post is viewed, commented on, shared, etc.)	Facebook Reach (Amount a post is viewed, commented on, shared, etc.)	Video (# and Topic)	Agency Mentions in Local Media (radio stations, local newspaper/di gital articles, etc.)	Boosted Activities (# and Topic)
November	4,355	415 (Down .8% from October)	29,400 (Up 12.8 % from October)	(1)Thanksgiving Food Safety	7	(2)Beacon Health Facebook Boosting for WIC and Immunizations for St. Joseph County.
TOTAL TO DATE (Since 10/1/2022)	Jollowers since last	2,761	646,382	10	368	16

Branch-Hillsdale-St. Joseph Community Health Agency Environmental Public Health Services Report for the December 12, 2024 Board of Health Meeting Prepared by Joseph Frazier R.E.H.S., Director of Environmental Health

Food Service Program

In our food section, we have had openings for two facilities: St. Joe's Pizza, located in Hillsdale County, featuring wood-fired pizza ovens, and Zae and Zeb's Pizza, located in Centerville, a small family pizza shop. Staff from all three offices, including myself, participated in radio interviews, offering helpful tips on safe food handling practices during the holidays. These can be nervous interviews, as staff are not used to giving interviews for radio, but they afford us the opportunity to help educate our county residents.

Well, Septic and Pools

To date, our general EH staff have participated in four separate educational trainings, held either at one of our offices or off-site locations. In the new year, there are already plans for an additional four trainings. These training opportunities are helping our new staff bridge the gap in knowledge and experience that the department has lost over the past year. Kyle, our EH General Supervisor, has begun reviewing and updating some of our swimming pool policies. Clarifying and updating these policies will ensure continuity across all three counties.

Other Areas

Our quality improvement project within Environmental Health is moving right along. To date all EH staff have gone through the first round of training with our clerical staff. This is a big win for us as we continue to make progress in developing out team!

EH Service Statistics Report

BRANCH - HILLSDALE - ST. JOSEPH COMMUNITY HEALTH AGENCY

ENVIRONMENTAL HEALTH SERVICE REPORT 20

2024/2025

		oc	тов	ER	,	YTD 20	24/20	25	,	YTD 20	23/202	4
	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL
WELL/SEWAGE SYSTEM EVAL.	_	4	3	7	_	4	3	7	_	-	1	1
CHANGE OF USE EVALUATIONS	2	5	9	16	2	5	9	16	3	8	6	17
CHANGE OF USE EVALUATIONS - OFFICE	3	4	9	16	3	4	9	16	5	2	14	21
ON-SITE SEWAGE DISPOSAL	10	7	8	25								
PERMITS NEW CONSTRUCTION	7	6	11	24	7	6	11	24	7	7	14	28
REPAIR/REPLACEMENT VACANT LAND EVALUATION	1	3	-	4	1	3	-	4	5 3	6	12	23
PERMITS DENIED	- 18	- 16	- 19	- 53	- 18	- 16	- 19	- 53	-	5 -	1	9
TOTAL	.0	.0		81	-	-	-	81	17	18	27	60
SEWAGE PERMITS INSPECTED	16	12	16	44	16	12	16	44	13	15	28	56
WELL PERMITS ISSUED	19	20	19	58	19	20	19	58	19	18	29	66
WELL PERMITS INSPECTED	24	13	12	49	24	13	12	49	6	20	21	47
FOOD SERVICE INSPECTION												
ROUTINE	23	24	48	95	23	24	48	95	23	32	43	98
NEW OWNER / NEW ESTABLISHMENT	1	1	2	4	1	1	2	4	-	1	1	2
FOLLOW-UP INSPECTION TEMPORARY	3	- 4	- 5	- 12	3	- 4	- 5	- 12	- 1	3 2	2 5	5 8
STFU/Mobile	2	4	10	16	2	4	10	16	4	7	9	20
PLAN REVIEW APPLICATIONS	1	1	1	3	1	1	1	3	1	-	-	1
FOOD COMPLAINTS RECEIVED	-	-	-	-	-	-	-	-	1	3	-	4
FOODBORNE ILLNESS INVESTIGATED	-	-	-	-	-	-	-	-	1	3	-	4
FOOD CLASSES												
MANAGEMENT CERTIFICATION CLASS	-	-	5	5	-	-	5	5	-	-	-	22
							-				-	
CAMPGROUND INSPECTION	-	-	-	-	-	-	-	-	-	-	-	-
NON-COMM WATER SUPPLY INSP.	-	-	-	-	-	-	-	-	1	-	4	5
SWIMMING POOL INSPECTION	-	-	1	1	-	-	1	1	-	-	-	-
PROPOSED SUBDIVISION REVIEW	-	-	-	-	-	-	-	-	-	-	-	-
SEPTIC TANK CLEANER	-	-	-	-	-	-	-	-	-	-	-	-
DHS LICENSED FACILITY INSP.	-	6	-	6	-	6	-	6	2	2	1	5
COMPLAINTS INVESTIGATIONS	2	3	2	7	2	3	2	7	-	-	-	-
LONG TERM MONITORING	-	-	-	-	-	-	-	-	-	-	-	14
BODY ART FACILITY INSPECTIONS	-	-	-	-	-	-	-	-	2	-	-	2



570 Marshall Road Coldwater, MI 49036 (517) 279 - 9561ext. 106 20 Care Drive Hillsdale, MI 49242 (517) 437 - 7395 ext. 311 1110 Hill Street Three Rivers, MI 49093 (269) 273 - 2161 ext. 233

Inspection Type Count By County

For Date Range: 10/01/2024 - 10/31/2024

County	Inspection Type / Reason	Count
Branch Count	y	
<u>Food Safety</u>		
	Non Foodborne Illness Complaint - Initial	3
	Pre-Opening - Pre-Opening	1
	Risk Based Inspection - Routine	23
	STFU Inspection - Routine	2
	STFU Pre-Opening - Pre-Opening	1
	Temporary Food Inspection - Routine	3
	Total # of Food Safety inspections - Branch County	33
Hillsdale Cour	nty	
<u>Food Safety</u>		
	Pre-Opening - Pre-Opening	1
	Risk Based Inspection - Routine	24
	STFU Inspection - Routine	4
	Temporary Food Inspection - Routine	4
	Total # of Food Safety inspections - Hillsdale County	33
St. Joseph Co	ınty	
Food Safety		
	Plan Review Activity - Initial	1
	Pre-Opening - Pre-Opening	2
	Progress Note - New Inspection Reason	2
	Risk Based Inspection - Routine	48

Inspection Type Count By County For Date Range: 10/01/2024 - 10/31/2024

County	Inspection Type / Reason	Count	
	STFU Inspection - Routine	10	
	Temporary Food Inspection - Routine	5	
	Total # of Food Safety inspections - St. Joseph County	68	
	Total # of inspections - All counties	<u>134</u>	



570 Marshall Road Coldwater, MI 49036 (517) 279 - 9561ext. 106 20 Care Drive Hillsdale, MI 49242 (517) 437 - 7395 ext. 311 1110 Hill Street Three Rivers, MI 49093 (269) 273 - 2161 ext. 233

Food Establishment Inspection Report by Facility Name

For Date Range: 10/01/2024 - 10/31/2024 and Food Program

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
A Hint of LLC	Litchfield	10/07/2024	Risk Based Inspection - Routine	0	0	0	1
Ambassador's for Christ Church		10/09/2024	Progress Note - New Inspection Reason	0	0	0	0
Ambassador's for Christ Church		10/17/2024	Risk Based Inspection - Routine	0	0	0	0
American Axel Manufacturing	Three Rivers	10/25/2024	Risk Based Inspection - Routine	0	0	0	0
AMERICAN LEGION MEMORIAL POST	BRONSON	10/16/2024	Risk Based Inspection - Routine	0	0	0	0
AMERICAN LEGION POST 454	Colon	10/04/2024	Risk Based Inspection - Routine	0	1	1	1
ANDERSON ELEMENTARY SCHOOL	BRONSON	10/01/2024	Risk Based Inspection - Routine	0	0	0	0
ANDREWS ELEM SCHOOL	Three Rivers	10/09/2024	Risk Based Inspection - Routine	0	0	0	0
Another One Bites The Crust - Another One Bites The Crust	Huntertown	10/14/2024	Temporary Food Inspection - Routine	0	0	0	0
Azteca Mexican Restaurant	Bronson	10/17/2024	Risk Based Inspection - Routine	0	0	0	3
BAILEY ELEMENTARY SCHOOL	Hillsdale	10/22/2024	Risk Based Inspection - Routine	0	0	0	0
Betzer Community Church	Pittsford	10/21/2024	Temporary Food Inspection - Routine	0	0	0	0
Biggby Coffee North Sturgis	Sturgis	10/16/2024	Risk Based Inspection - Routine	2	0	2	3
BOB EVANS RESTAURANTS LLC #2035	COLDWATER	10/01/2024	Risk Based Inspection - Routine	0	0	0	2

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
BRANCH AREA CAREERS CENTER	COLDWATER	10/14/2024	Risk Based Inspection - Routine	0	0	0	1
BRANCH COUNTY AYSO-CREAL SOCCER COMPLEX	COLDWATER	10/28/2024	Risk Based Inspection - Routine	0	0	0	1
Branch County Coalition Against Domestic Violence & Sexual Assault	Coldwater	10/07/2024	Temporary Food Inspection - Routine	0	0	0	0
BRONSON HIGH SCHOOL	BRONSON	10/01/2024	Risk Based Inspection - Routine	0	0	0	1
Bucket List Dreams	Monroe	10/21/2024	STFU Inspection - Routine	0	0	0	0
BUFFALO WILD WINGS (STURGIS)	STURGIS	10/03/2024	Risk Based Inspection - Routine	0	0	0	0
CAMDEN UNITED METHODIST CHURCH	Camden	10/10/2024	Risk Based Inspection - Routine	0	0	0	0
CAMDEN-FRONTIER SCHOOL	Camden	10/10/2024	Risk Based Inspection - Routine	0	0	0	0
CENTRAL ELEMENTARY SCHOOL	White Pigeon	10/08/2024	Risk Based Inspection - Routine	0	0	0	0
CHARLIES PRIDE BBQ	COLDWATER	10/09/2024	STFU Inspection - Routine	0	0	0	0
CHARLIES PRIDE BBQ	COLDWATER	10/10/2024	STFU Inspection - Routine	0	0	0	0
Chunky Butts BBQ & Grill	Osseo	10/14/2024	STFU Inspection - Routine	0	0	0	0
COLDWATER BURGER KING #4652	COLDWATER	10/28/2024	Non Foodborne Illness Complaint - Initial	0	0	0	0
COLDWATER HIGH SCHOOL	COLDWATER	10/16/2024	Risk Based Inspection - Routine	0	0	0	0
COLDWATER HIGH SCHOOL	COLDWATER	10/16/2024	Risk Based Inspection - Routine	0	0	0	0
COLON ELEM SCHOOL	Sturgis	10/03/2024	Risk Based Inspection - Routine	0	0	0	1
COLON HIGH SCHOOL	COLON	10/03/2024	Risk Based Inspection - Routine	0	1	1	2
Colon United Methodist Church	Colon	10/03/2024	Risk Based Inspection - Routine	0	0	0	0
CONSTANTINE COMMUNITY SOUP KITCHEN	Constantine	10/30/2024	Risk Based Inspection - Routine	0	0	0	0
Constantine Fire Department	Constantine	10/30/2024	Risk Based Inspection - Routine	0	0	0	0
Constantine High School	Constantine	10/14/2024	Temporary Food Inspection - Routine	0	0	0	0
CONSTANTINE HIGH SCHOOL	Constantine	10/22/2024	Risk Based Inspection - Routine	0	0	0	0
CONSTANTINE MIDDLE SCHOOL	Constantine	10/22/2024	Risk Based Inspection - Routine	0	1	1	0
COTTAGE INN PIZZA	COLDWATER	10/04/2024	Non Foodborne Illness Complaint - Initial	0	0	0	0
Cottage Inn Pizza Sturgis	Sturgis	10/08/2024	Risk Based Inspection - Routine	0	2	1	1

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Cowboy Up	Mendon	10/17/2024	Risk Based Inspection - Routine	0	0	0	1
CULVER'S OF STURGIS	STURGIS	10/29/2024	Risk Based Inspection - Routine	0	0	0	2
CURLY'S INC.	Colon	10/04/2024	Risk Based Inspection - Routine	1	0	1	1
Deadlift Coffee Company LLC	Three Rivers	10/16/2024	Risk Based Inspection - Routine	0	0	0	0
DEARTH COMMUNITY CENTER	Coldwater	10/08/2024	Risk Based Inspection - Routine	0	1	1	0
DUTCH UNCLE DONUTS INC	COLDWATER	10/31/2024	Risk Based Inspection - Routine	0	0	0	2
EASTSIDE ELEM SCHOOL	Constantine	10/22/2024	Risk Based Inspection - Routine	0	0	0	0
EL Cunado Mexican Cuisine LLC	Coldwater	10/25/2024	Pre-Opening - Pre-Opening	0	0	0	0
El Sabor de Mi Pueblo	Sturgis	10/22/2024	STFU Inspection - Routine	0	0	0	0
EL TACO LOCO II	Coldwater	10/02/2024	Temporary Food Inspection - Routine	0	0	0	0
ENRICHMENT CENTER	Sturgis	10/02/2024	Risk Based Inspection - Routine	0	0	0	0
AMILY AFFAIR RESTAURANT	MENDON	10/01/2024	Risk Based Inspection - Routine	0	0	0	0
armhouse Kitchen and Ale	Camden	10/21/2024	Risk Based Inspection - Routine	0	0	0	0
TRST PRESBYTERIAN CHURCH	THREE RIVER	S 10/09/2024	Risk Based Inspection - Routine	0	0	0	0
IRST PRESBYTERIAN CHURCH	HILLSDALE	10/11/2024	Risk Based Inspection - Routine	0	0	0	0
FIVE STAR PIZZA	UNION CITY	10/03/2024	Risk Based Inspection - Routine	0	0	0	1
FIVE STAR PIZZA	Colon	10/04/2024	Risk Based Inspection - Routine	0	0	0	0
Gibby's	Mendon	10/01/2024	Risk Based Inspection - Routine	1	0	1	2
Great Lakes Shaved Ice Co	Colon	10/14/2024	STFU Inspection - Routine	0	0	0	0
Hillsdale County ISD - YAP	Hillsdale	10/17/2024	Risk Based Inspection - Routine	0	0	0	0
HILLSDALE GOLF & COUNTRY CLUB	Hillsdale	10/25/2024	Risk Based Inspection - Routine	0	0	0	1
HILLSDALE HIGH SCHOOL	Hillsdale	10/17/2024	Risk Based Inspection - Routine	0	0	0	0
Hillsdale Lions Club	Hillsdale	10/21/2024	Temporary Food Inspection - Routine	0	0	0	0
IIP PADDER'S CATERING	STURGIS	10/21/2024	Risk Based Inspection - Routine	0	0	0	0
Holiday Inn Express & SuitesFood	Three Rivers	10/10/2024	Risk Based Inspection - Routine	1	0	1	0
HOPPIN ELEM	THREE RIVER	S 10/09/2024	Risk Based Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
HUNGRY HOWIES	COLDWATER	10/09/2024	Risk Based Inspection - Routine	0	0	0	1
Jaspare's Pizza	Mendon	10/01/2024	Risk Based Inspection - Routine	0	0	0	0
Jim's Place	Coldwater	10/28/2024	Risk Based Inspection - Routine	0	1	1	0
JONESVILLE HIGH SCHOOL	JONESVILLE	10/17/2024	Risk Based Inspection - Routine	0	0	0	0
JONESVILLE MIDDLE SCHOOL	JONESVILLE	10/09/2024	Risk Based Inspection - Routine	0	0	0	0
JONESVILLE UNITED METHODIST	JONESVILLE	10/11/2024	Risk Based Inspection - Routine	0	0	0	0
Kentucky Fried Chicken Coldwater	COLDWATER	10/25/2024	Non Foodborne Illness Complaint - Initial	0	0	0	1
Kentucky Fried Chicken Sturgis		10/17/2024	Risk Based Inspection - Routine	0	0	0	0
La Cocina de Chelo	Union City	10/23/2024	STFU Pre-Opening - Pre-Opening	1	0	1	0
Lawless's BBQ, LLC	Jonesville	10/22/2024	STFU Inspection - Routine	0	0	0	0
LEGG MIDDLE SCHOOL	COLDWATER	10/10/2024	Risk Based Inspection - Routine	0	0	0	0
LINCOLN ELEMENTARY SCHOOL	COLDWATER	10/08/2024	Risk Based Inspection - Routine	1	0	1	0
LINCOLN LEARNING CENTER (BRANCH ISD)	COLDWATER	10/08/2024	Risk Based Inspection - Routine	0	0	0	0
LITCHFIELD COMMUNITY SCHOOL	LITCHFIELD	10/25/2024	Risk Based Inspection - Routine	0	0	0	0
LITCHFIELD CONGREGATIONAL CHURCH	Litchfield	10/25/2024	Risk Based Inspection - Routine	0	0	0	0
MCDONALDS OF COLDWATER	COLDWATER	10/08/2024	Risk Based Inspection - Routine	0	0	0	1
McDONALDS OF STURGIS 2180	Sturgis	10/08/2024	Risk Based Inspection - Routine	0	0	0	3
MEEKS MILL CAFE	Constantine	10/02/2024	Risk Based Inspection - Routine	0	0	0	0
MEL'S 50s DINER	UNION CITY	10/03/2024	Risk Based Inspection - Routine	0	1	1	1
Mendon United Methodist Church	MENDON	10/07/2024	Risk Based Inspection - Routine	0	0	0	0
MYSTIC STAR #354/MASONIC TEMPLE	BRONSON	10/21/2024	Risk Based Inspection - Routine	0	0	0	0
New Beginning Church	Montgomery	10/21/2024	Temporary Food Inspection - Routine	0	0	0	0
NORTON ELEM	THREE RIVERS	5 10/24/2024	Risk Based Inspection - Routine	0	0	0	0
Oasis of Love Family Church	Coldwater	10/28/2024	Temporary Food Inspection - Routine	0	0	0	0
Ohana Kalea Shave Ice	Lagrange	10/17/2024	STFU Inspection - Routine	0	0	0	0
Overflowing Cups & Cones	Hillsdale	10/18/2024	Risk Based Inspection - Routine	0	0	0	1

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Paradiso Wine Bar / Inferno Cigar Lounge	Hillsdale	10/24/2024	Risk Based Inspection - Routine	0	0	0	0
Party on the Patio Food Truck	Wolcottville	10/22/2024	STFU Inspection - Routine	0	0	0	0
PENNY'S	HILLSDALE	10/22/2024	Risk Based Inspection - Routine	0	0	0	1
PITTSFORD AREA SCHOOLS	Pittsford	10/31/2024	Risk Based Inspection - Routine	0	0	0	0
Pivotal	Centreville	10/11/2024	Temporary Food Inspection - Routine	0	0	0	0
Popeyes	Sturgis	10/08/2024	Plan Review Activity - Initial	0	0	0	0
Popeyes	Sturgis	10/11/2024	Pre-Opening - Pre-Opening	0	0	0	2
PRAIRIE LAKE TAVERN	Sturgis	10/04/2024	Risk Based Inspection - Routine	0	0	0	0
PROMEDICA - COLDWATER REGIONAL HOSPITAL	COLDWATER	10/14/2024	Risk Based Inspection - Routine	0	0	0	0
READING HIGH SCHOOL	READING	10/14/2024	Risk Based Inspection - Routine	0	0	0	0
RED FOX SPORTSMAN CLUB	JONESVILLE	10/17/2024	Risk Based Inspection - Routine	0	0	0	0
REYNOLDS ELEMENTARY SCHOOL	Reading	10/14/2024	Risk Based Inspection - Routine	0	0	0	0
RIVER LAKE INN	SHERWOOD TWP.	10/17/2024	Risk Based Inspection - Routine	0	0	0	0
RIVERSIDE ELEM SCHOOL	Constantine	10/22/2024	Risk Based Inspection - Routine	0	0	0	0
SALVATION ARMY	Sturgis	10/29/2024	Risk Based Inspection - Routine	0	0	0	1
AM'S PLACE	THREE RIVERS	10/17/2024	Risk Based Inspection - Routine	0	0	0	1
PECIAL ED'S DONUTS	Somerset Center	10/21/2024	STFU Inspection - Routine	0	0	0	0
T MARY'S ASSUMPTION CHURCH & SCHOOL	BRONSON	10/17/2024	Risk Based Inspection - Routine	0	0	0	1
t. Joe's Cafe	Hillsdale	10/17/2024	Pre-Opening - Pre-Opening	0	1	0	1
TURGIS HIGH SCHOOL	Sturgis	10/02/2024	Risk Based Inspection - Routine	0	0	0	0
ubway - Jonesville	Jonesville	10/10/2024	Risk Based Inspection - Routine	0	0	0	1
Subway 3489	STURGIS	10/17/2024	Risk Based Inspection - Routine	0	0	0	0
Sugar Shack	Colon	10/14/2024	STFU Inspection - Routine	0	0	0	0
Sugar Shack	Colon	10/25/2024	STFU Inspection - Routine	0	0	0	0
Faco Bell #32990	Sturgis	10/15/2024	Risk Based Inspection - Routine	0	0	0	1
Tacos Guerrerenses	Constantine	10/08/2024	STFU Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
THE DECK DOWN UNDER	Jerome	10/07/2024	Risk Based Inspection - Routine	0	0	0	0
The Landmark Tap House DBA Main St Cafe	Three Rivers	10/02/2024	Risk Based Inspection - Routine	0	0	0	1
The Panini Grille LLC	Sturgis	10/08/2024	STFU Inspection - Routine	0	0	0	0
Three Rivers Promise	Three Rivers	10/14/2024	Temporary Food Inspection - Routine	0	0	0	0
own Fryer Restaurant LLC	Constantine	10/28/2024	Risk Based Inspection - Routine	0	0	0	0
rinity Lutheran Church School	Sturgis	10/21/2024	Risk Based Inspection - Routine	0	0	0	0
ltzimate Eatz	Burr Oak	10/07/2024	Temporary Food Inspection - Routine	0	0	0	0
NITED METHODIST CHURCH (WP)	White Pigeon	10/16/2024	Progress Note - New Inspection Reason	0	0	0	0
NITED METHODIST CHURCH (WP)	White Pigeon	10/24/2024	Risk Based Inspection - Routine	0	0	0	0
seless Creatures Brewing Co	Three Rivers	10/25/2024	Risk Based Inspection - Routine	0	0	0	0
el's	Three Rivers	10/21/2024	Temporary Food Inspection - Routine	0	0	0	0
ALL SCHOOL	STURGIS	10/08/2024	Risk Based Inspection - Routine	1	0	1	1
Veenie Kings	THREE RIVER	S 10/16/2024	STFU Inspection - Routine	0	0	0	0
Veenie Kings 2	Three Rivers	10/31/2024	STFU Inspection - Routine	0	0	0	0
VHITE PIGEON HIGH SCHOOL	WHITE PIGEON	10/08/2024	Risk Based Inspection - Routine	0	0	0	0
VILLIAMS ELEMENTARY SCHOOL	JONESVILLE	10/17/2024	Risk Based Inspection - Routine	0	0	0	1
ae & Zeb's Pizza	Centreville	10/18/2024	Pre-Opening - Pre-Opening	0	0	0	0
				8	9	15	47

Food Inspection Codes

P-This indicates a priority violation which is a violation that includes a quantifiable measure to show control of hazards such as cooking, cooling, reheating and handwashing. It is in general terms a violation that can potentially lead directly to a foodborne illness.

Pf-This is a priority foundation violation which is a violation that supports a priority violation. For example, the lack of soap or towels at a handwash sink is a Pf. This supports the priority violation of not washing hands.

C- This is a core violation. This is an item that usually relates to general sanitation, operation controls and maintenance of facilities and equipment. Not cleaning floors is an example of a core violation.

CDI- This indicates a violation was observed during the inspection and was brought to the attention of the person in charge. At that time, the violation was corrected while the inspector was present at the facility.



Updates:

- 1. Services to Victims of Elder Abuse Program Updates:
 - We are working with the Health Education/Promotion staff on a "Home for the Holiday's" campaign
 to raise awareness of scams! A press release was issued, local radio interviews have occurred in
 Sturgis and Coldwater, and a full-blown social media campaign has kicked off "12 Days of Scams".
 Check out our website and AAA IIIC on Facebook, Instagram, etc.
 - We've begun some additional collaborative work with WellWise Services (Region 2 AAA serving Hillsdale, Jackson & Lenawee counties) surrounding further expansion of their "SafeHaven" program and additional time/supports for our direct work with victims of abuse, neglect and/or exploitation. Both of our organizations are funded with Victims of Crime Act grants and we are trying to expand some of our best-practices!
- 2. FY2025 Budget Update: Michigan AAA's are operating under a 3-month Statement of Grant Award... the end of 2024 should be interesting, along with the start of the new year!
- 3. Quality Improvement Project Updates:
 Our division is working on our Community Living Program Satisfaction Surveys as a part of quality improvement this year... We have received over 45% return rate on our surveys among current participants. Stay tuned we'll have more information to share once the data is compiled!
- 4. Staffing update: We are holding on hiring a part-time Outreach Specialist for now. We also have the full-time RN Care Consultant position open.
- 5. MDHHS No Wrong Door 2025: As previously shared, the ACLS Bureau is abruptly changing how they administer the State Health Insurance Program along with implementing a new project called Options Counseling for people seeking information about long term supports and services. We continue to work closely with our neighboring AAA's to submit a proposal for the "No Wrong Door" grant. Region 3A (Kalamazoo), Region 3B/CareWell (Calhoun & Barry) and Region 3C (Branch & St. Joseph) are working together to build upon our existing service delivery systems and local partnerships to provide Person-Centered Options Counseling and the State Health Insurance Assistance Program across the collaborative 5-county area. Region 3B has volunteered to be "lead" as the applicant, with the proposal outlining sub-agreements to 3A and 3C. We've also invited our shared community partner, Disability Network of Southwest Michigan, to the project as they bring longstanding expertise in serving people with disabilities. Our current health insurance program sites (called "MMAP" at each of our County Commission on Aging offices) support this approach for a collaborative proposal and their respective Boards are also informed. Though the pool of funding is not any larger than it is currently, the goal is to keep the program local with IIIC as the local program administrator. Our proposal's intent is to remain efficient and collaborative, as always.

During this time of year, we are grateful for one another, the individuals and families we serve, and the amazing community partners in our network!



Branch-Hillsdale-St Joseph Community Health Agency

Check/Voucher Register - Check Register for BOH 00103 - Cash - Accounts Payable From 11/1/2024 Through 11/30/2024

Payee	Check Amount	Check Number	Effective Date
Abila	2,100.23	24-11-01 A.01	11/1/2024
Abila	2,100.23	24-11-29 A.01	11/29/2024
ACD.NET	1,935.32	54608	11/15/2024
Action Quick Print Plus	48.00	24-11-01 A.02	11/1/2024
Action Quick Print Plus	195.00	24-11-29 A.02	11/29/2024
Aflac District Office	533.99	24-11-08 PR.01	11/8/2024
Aflac District Office	497.27	24-11-22 PR.01	11/22/2024
AIMMEE MULLENDORE	745.95	24-11-15 A.01	11/15/2024
Alert Medical Alarms	224.60	54609	11/15/2024
Alerus Retirement Solutions	3,451.00	24-11-08 R.01	11/8/2024
Alerus Retirement Solutions	3,401.00	24-11-22 R.01	11/22/2024
Amazon Capital Services, Inc	526.86	24-11-01 P.01	11/1/2024
Amazon Capital Services, Inc	364.77	24-11-15 P.01	11/15/2024
Amazon Capital Services, Inc	400.29	24-11-29 P.01	11/29/2024
Angela Shedd	899.26	24-11-01 A.03	11/1/2024
Angela Shedd	1,540.80	24-11-15 A.02	11/15/2024
Angela Shedd	1,240.00	24-11-29 A.03	11/29/2024
Barbara P. Foley	46.16	54604	11/8/2024
Barbara P. Foley	46.16	54625	11/22/2024
Beacon Properties Administration	4,631.85	24-11-29 A.04	11/29/2024
Blue Cross Blue Shield	62,145.78	24-11-15 P.02	11/15/2024
Branch Area Transit Authority	1,566.48	24-11-15 A.03	11/15/2024
Branch County Commission	25,710.92	24-11-15 A.04	11/15/2024
Branch County Complex	5,694.28	24-11-29 A.05	11/29/2024
Card Services Center	1,465.11	24-11-29 P.03	11/29/2024
Century Bank & Trust	25.00	54610	11/15/2024
Century Bank - Hillsdale Maintenance	2,000.00	24-11-29 A.06	11/29/2024
Century Bank - Three Rivers	2,000.00	24-11-29 A.07	11/29/2024
Maintenance			
Century Basic	957.53	24-11-08 R.02	11/8/2024
Century Basic	957.53	24-11-22 R.02	11/22/2024
Century EFPTS	45.92	24-11-08 L.01	11/8/2024
Century EFPTS	34,036.62	24-11-08 R.03	11/8/2024
Century EFPTS	6.00	24-11-08 R.04	11/8/2024
Century EFPTS	114.78	24-11-22 L.01	11/22/2024
Century EFPTS	25,298.26	24-11-22 R.03	11/22/2024
Century Mastercard	2,767.91	24-11-01 P.03	11/1/2024
Century MERS	50,000.00	24-11-01 A.04	11/1/2024
Century MERS	48,347.37	24-11-15 A.05	11/15/2024
Century State/Michigan State Treasury	12.56	24-11-08 L.02	11/8/2024
Century State/Michigan State Treasury	5,585.92	24-11-08 R.05	11/8/2024
Century State/Michigan State Treasury	9.40	24-11-22 L.02	11/22/2024
Century State/Michigan State Treasury	4,605.47	24-11-22 R.04	11/22/2024
Champ Software, Inc.	50,865.00	54628	11/29/2024
Charter Communications	149.98	24-11-15 P.03	11/15/2024
Cintas Corporation Loc 351	165.45	24-11-15 P.04	11/15/2024
City Of Coldwater	80.00	24-11-15 A.06	11/15/2024
City Of Coldwater	20.00	24-11-29 A.08	11/29/2024
City of Jonesville	80.00	24-11-01 A.05	11/1/2024
City of Jonesville	360.00	24-11-29 A.09	11/29/2024
City of Sturgis	100.00	54591	11/1/2024
City Of Three Rivers	270.00	24-11-15 A.07	11/15/2024
City Of Three Rivers	180.00	24-11-29 A.10	11/29/2024

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Branch-Hillsdale-St Joseph Community Health Agency

Check/Voucher Register - Check Register for BOH 00103 - Cash - Accounts Payable From 11/1/2024 Through 11/30/2024

Payee	Check Amount	Check Number	Effective Date
City Of Three Rivers	153.93	54611	11/15/2024
ConnectAmerica	228.00	24-11-15 A.08	11/15/2024
Control Solutions Inc.	919.00	24-11-01 A.06	11/1/2024
Crossroads Home Care Inc.	2,249.97	24-11-15 A.09	11/15/2024
Current Office Solutions	31.99	24-11-29 A.11	11/29/2024
Daman Ehrhardt	200.00	54592	11/1/2024
DELTA DENTAL	3,285.96	24-11-15 A.10	11/15/2024
Department of Family Medicne	100.00	54593	11/1/2024
DiningRD	4,523.74	24-11-15 A.11	11/15/2024
DL Gallivan Office Solutions	545.56	54594	11/1/2024
DL Gallivan Office Solutions	596.15	54629	11/29/2024
Dr. Karen M. Luparello	4,220.17	24-11-29 A.12	11/29/2024
Fawn River Apartments	157.00	54595	11/1/2024
Fawn River Apartments	630.00	54596	11/1/2024
FedEx	5.46	24-11-15 P.05	11/15/2024
Frontier	290.91	24-11-01 P.04	11/1/2024
Frontier	292.52	24-11-29 P.04	11/29/2024
GDI Services Inc.	4,562.04	24-11-29 A.13	11/29/2024
Glaxo-Smithkline Financial Inc.	878.32	24-11-15 A.12	11/15/2024
Health Equity	1,766.60	24-11-08 PR.02	11/8/2024
Health Equity	1,810.84	24-11-22 PR.02	11/22/2024
Helping Angels Home Care LLC	935.20	24-11-15 A.13	11/15/2024
Hillsdale Board Of Public Utilities	1,660.30	24-11-01 P.05	11/1/2024
Hillsdale Board Of Public Utilities	1,763.06	24-11-29 P.05	11/29/2024
Hillsdale County Treasurer	810.19	24-11-15 A.14	11/15/2024
HomeJoy of Kalamzoo	2,630.94	24-11-15 A.15	11/15/2024
Hospital Network Healthcare Services	129.50	24-11-15 A.16	11/15/2024
Indiana MI Power Company	621.56	24-11-15 P.06	11/15/2024
Indiana State Tax	133.14	24-11-08 R.06	11/8/2024
Indiana State Tax	97.98	24-11-22 R.05	11/22/2024
Jason Lutz	210.00	54630	11/29/2024
Jeherose Domincel	509.69	54597	11/1/2024
John Galdes	(125.00)	54563	11/15/2024
John Galdes	100.00	54612	11/15/2024
Kathryn Green	150.00	54631	11/29/2024
Lake House	2,076.00	54598	11/1/2024
Legal Services Of S.Central MI	1,790.00	24-11-15 A.17	11/15/2024
Macquarie Equipment Capital Inc.	1,322.75	24-11-15 A.18	11/15/2024
MALPH	4,737.00	54632	11/29/2024
Maplecrest, LLC	1,265.08	24-11-29 A.14	11/29/2024
McKesson Medical-Surgical Gov. Solutions LLC	422.20	24-11-01 P.06	11/1/2024
McKesson Medical-Surgical Gov. Solutions LLC	5,228.64	24-11-15 P.07	11/15/2024
Medical Care Alert	491.95	24-11-15 A.19	11/15/2024
MERS 5% EMPLOYEES	16,936.29	24-11-15 A.20	11/15/2024
MI Municipal Risk Management Authority	179.00	24-11-29 A.15	11/29/2024
MI Security & Lock, LLC	1,000.00	54613	11/15/2024
Michigan Association for Local Public Health	50.00	54614	11/15/2024
Michigan Public Health Institute	4,870.00	24-11-15 A.21	11/15/2024
Michigan State Disbursement Unit	190.11	54605	11/8/2024
Michigan State Disbursement Unit	190.11	54626	11/22/2024

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Branch-Hillsdale-St Joseph Community Health Agency

Check/Voucher Register - Check Register for BOH 00103 - Cash - Accounts Payable From 11/1/2024 Through 11/30/2024

Payee	Check Amount	Check Number	Effective Date
Mistel de Varona	675.00	54599	11/1/2024
Mistel de Varona	675.00	54615	11/15/2024
Mistel de Varona	607.50	54633	11/29/2024
Mitchille Vroman	136.22	54600	11/1/2024
National Registry of Food Safety Professionals	179.95	54616	11/15/2024
Nationwide	620.00	24-11-08 R.07	11/8/2024
Nationwide	620.00	24-11-22 R.06	11/22/2024
Oklahoma Centralized Support Registry	415.38	54606	11/8/2024
PFIZER INC	5,671.58	54617	11/15/2024
Pivotal	4,952.00	54601	11/1/2024
Principal Life Insurance Company	1,809.49	24-11-01 P.07	11/1/2024
Principal Life Insurance Company	1,859.57	24-11-29 P.06	11/29/2024
Prompt Care Express PC	272.00	54618	11/15/2024
Reserve Account	3,000.00	24-11-01 A.07	11/1/2024
Reserve Account	4,000.00	24-11-29 A.16	11/29/2024
Richard Clark	2,613.80	24-11-29 A.17	11/29/2024
Riley Pumpkin Farm	350.00	24-11-29 A.18	11/29/2024
RJB Heating & Cooling	560.00	54619	11/15/2024
RJB Heating & Cooling	150.00	54634	11/29/2024
Rosati Schultz Joppich Amtsbueshler	1,290.00	24-11-01 A.08	11/1/2024
Rosati Schultz Joppich Amtsbueshler	1,515.00	24-11-29 A.19	11/29/2024
ROSE PEST SOLUTIONS	83.00	24-11-01 A.09	11/1/2024
ROSE PEST SOLUTIONS	83.00	24-11-29 A.20	11/29/2024
Sanofi Pasteur Inc.	892.96	24-11-15 P.08	11/15/2024
Semco Energy	56.98	24-11-01 P.08	11/1/2024
Semco Energy	114.32	24-11-29 P.07	11/29/2024
ServPro	15,668.26	54620	11/15/2024
Shred It	120.00	24-11-01 P.09	11/1/2024
Sparkle Fireworks Inc	49.00	54621	11/15/2024
ST JOSEPH CO HSC	4,000.00	54622	11/15/2024
St Joseph County COA	32,006.54	24-11-15 A.22	11/15/2024
St Joseph County Transit Authority	3,820.30	24-11-15 A.23	11/15/2024
Staples	1,259.13	24-11-15 P.09	11/15/2024
State of MI - EGLE	34.00	54635	11/29/2024
State Of Michigan	221.00	54602	11/1/2024
State Of Michigan	489.00	54636	11/29/2024
State of Michigan-Dept	23.00	54623	11/15/2024
State of Michigan-Dept	57.50	54637	11/29/2024
Stratus Video, LLC	3,013.64	54603	11/1/2024
Stratus Video, LLC	4,547.94	54638	11/29/2024
Thurston Woods Village	1,464.50	54624	11/15/2024
TMK Worldwide, LLC	1.71	24-11-01 A.10	11/1/2024
TMK Worldwide, LLC	164.14	24-11-15 A.24	11/15/2024
Velocity Investments C/O Timothy Baxter & Associates	498.36	54607	11/8/2024
Velocity Investments C/O Timothy Baxter & Associates	498.36	54627	11/22/2024
Verizon	1,145.86	24-11-15 P.10	11/15/2024
VRI INC.	135.00	24-11-15 A.25	11/15/2024
Report Total	530,795.85		

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Branch-Hillsdale-St Joseph Community Health Agency Balance Sheet - Unposted Transactions Included In Report As of 10/31/2024

Current Period Balance

	Current I criou Darance
Assets	
Cash on Hand	93,136.57
Cash with County Treasurer	4,376,227.54
Community Foundation Grant	309,955.94
Cash HD Building Maintenance	34,450.00
Cash TR Building Maintenance	59,049.40
Accounts Receivable	119,412.81
Due from Dental DAPP	1,275.67
Due from State	(1,112,899.87)
Due from Other Funding Sources	405,665.64
Prepaid Expenses	133,626.80
Biologic Inventory	158,221.32
Total Assets	4,578,121.82
	, ,
Liabilities	
Accounts Payable	259,293.03
Payroll Liabilites	157,509.67
Deferred Revenue	238,317.09
Deferred Revenue BR	38,371.17
Deferred Revenue HD	40,531.50
Deferred Revenue SJ	53,829.33
Biologics	158,221.32
Total Liabilities	946,073.11
Net Assets	
Operation Fund Balance	321,417.74
Restricted Fund Balance	549,706.13
Designated Fund Balance	2,760,924.84
Total Net Assets	3,632,048.71
Total Liabilities and Net Assets	4,578,121.82
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Branch-Hillsdale-St Joseph Community Health Agency

Statement of Revenues and Expenditures - Orig Budget - Expense by Line - Summary FY22 - Unposted Transactions Included In Report From 10/1/20

12 Month Grants Should be 8.33% Expended, 9 Month Grants Should be 11.11%

	Current	Year to	Total Budget	Expende
Total Expense	Month	Date	- Original	d
008 Salary & Fringe Payoff	19,402.01	19,402.01	80,000.00	24.25%
Over due to retirement of long-term employee in October. This will fall back in line as the year progresses.				
717 EGLE Swiming Pools	5,495.59	5,495.59	16,865.98	32.58%
Over due to the cycle of pool inspections. This will fall back in line as the year progresses.				
720 EH- Complaints Over budget. Will continue to monitor. This should fall back in line as the year progresses.	759.96	759.96	3,211.83	23.66%
Over budget due to increased revenue received in October. Should fall back in line as the year progresses.	17,998.71	17,998.71	86,220.00	20.87%
325 CSHCS	28,687.35	28,687.35	222,409.00	12.89%
Within budget - RU 325 must be fully expended before RU 112 can be used. When looking at these 2 budgets together they are currently at 8.19%.	ŕ	Í	ŕ	
107 Medicaid Outreach	1,972.05	1,972.05	16,563.79	11.90%
Increased activity (may be due to open insurance enrollment period). Will continue to monitor.				
138 Immunization IAP	159,075.11	159,075.11	1,347,959.01	11.80%
Will continue to monitor.	0.502.21	0.502.21	97 120 20	10.000/
338 Immunization Vaccine Handling Will continue to monitor.	9,503.31	9,503.31	87,130.29	10.90%
327 Hearing (ELPHS) Within budget, as this is a 9 mth program	11,647.84	11,647.84	109,050.33	10.68%
326 Vision (ELPHS)	11,347.72	11,347.72	110,075.33	10.30%
Within budget, as this is a 9 mth program				0.5007
108 WIC Breastfeeding Will continue to monitor.	11,681.28	11,681.28	120,615.90	9.68%
332 HIV Prevention	3,176.31	3,176.31	34,555.86	9.19%
Will continue to monitor.	4.621.05	4 621 05	52 501 00	0.640/
021 Dental Clinic - Three Rivers Addressed in budget amendment #1	4,631.85	4,631.85	53,591.00	8.64%
014 VOCA	17,723.07	17,723.07	205,743.41	8.61%
Will continue to monitor.				
032 Emergency Preparedness Will continue to monitor.	15,323.80	15,323.80	183,098.50	8.36%
109 WIC	94,442.31	94,442.31	1,138,925.86	8.29%

Branch-Hillsdale-St Joseph Community Health Agency

Statement of Revenues and Expenditures - Orig Budget - Expense by Line - Summary FY22 - Unposted Transactions Included In Report

405 Grant Writing	0.00	0.00	1,700.30	0.00%
= =	0.00	0.00	1,988.38	0.000/
355 COVID-19 PH Workforce Supplemental	156.66	156.66	0.00	0.00%
286 HEP Special Projects	136.37	136.37	0.00	0.00%
255 Community Health Direction	0.00	0.00	143,538.00	0.00%
210 Beacon Health	9,941.90	9,941.90	0.00	0.00%
202 Oral Health	3,478.32	3,478.32	0.00	0.00%
112 CSHCS Medicaid Outreach	0.00	0.00	127,876.82	0.00%
097 CSHCS Donations BR HD	0.00	0.00	25,345.86	0.00%
035 Vector Borne Disease Surveillance	0.00	0.00	34,063.53	0.00%
024 MERS Pension Underfunded Liability	0.00	0.00	44,590.00	0.00%
023 Capital Expenditures	0.00	0.00	73,000.00	0.00%
351 CELC Infection Prevention	2,612.46	2,612.46	0.00	0.00%
025 PH Workforce & Infastructure	135.04	135.04	136,948.44	0.09%
719 Body Art	17.35	17.35	15,770.84	0.11%
724 PFAS - Westside Landfill	50.47	50.47	8,227.13	0.61%
101 Workforce Development	447.88	447.88	57,854.56	0.77%
716 EGLE Campgrounds	173.57	173.57	20,969.76	0.82%
723 PFAS Response - White Pigeon	106.03	106.03	8,114.28	1.30%
205 OHSP Grant	2,527.99	2,527.99	82,102.31	3.07%
015 Local Expenses - Unallowable by Grants	584.57	584.57	16,747.37	3.49%
745 Type II Water	7,661.50	7,661.50	218,678.48	3.50%
363 363 CVDIMS Covid Immz Supplemental	6,600.62	6,600.62	164,227.87	4.01%
718 EGLE Septage	325.89	325.89	7,113.51	4.58%
029 Dental Clinic - Hillsdale	650.91	650.91	14,000.00	4.64%
722 PFAS Response	79.95	79.95	1,625.13	4.91%
329 MCH Enabling Children	2,452.04	2,452.04	47,958.05	5.11%
345 Lead Testing	4,294.92	4,294.92	77,290.04	5.55%
207 MCRH Community Health Workers	11,708.68	11,708.68	197,376.95	5.93%
096 CSHCS Donations SJ	2,223.72	2,223.72	35,863.57	6.20%
721 Drinking Water Supply	32,301.65	32,301.65	491,244.07	6.57%
012 Area Agency on Aging	107,182.76	107,182.76	1,615,541.80	6.63%
704 Food Service	45,371.54	45,371.54	656,303.53	6.91%
341 Infectious Disease	27,875.79	27,875.79	390,674.17	7.13%
331 STD	12,882.96	12,882.96	178,452.47	7.21%
605 General EH Services	3,008.80	3,008.80	40,957.12	7.34%
714 Onsite Sewage Disposal From 10 201 CSF Carseats	38,293.97 2,188.43	38,293.97 2,188.43	29,690.15	7.37%
	1X / Y 1 Y 1	18/919/	492,888.19	7.76%

The Agency is currently 0.37% under budget.



December 2, 2024 – Board of Health Finance Committee Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health, Finance Committee meeting was called to order by Jared Hoffmaster at 9:01 AM. Roll call was completed as follows: Jared Hoffmaster, Jon Houtz, and Steve Lanius.

Also present from BHSJ: Rebecca Burns, and Theresa Fisher

Mr. Lanius moved to approve the agenda with support from Mr. Houtz. The motion passed unopposed.

Public Comment: No public comments were given.

New Business:

- o Mr. Houtz moved to recommend the full board approve FY24-25 budget amendment #1 as presented with support from Mr. Lanius. The motion passed unopposed.
- Mr. Lanius moved to recommend that the full Board approve the updated wage scale as presented, which includes a 5% increase. The motion received support from Mr. Houtz and passed unopposed.
- Mr. Houtz moved to recommend that the full Board approve the updated meeting schedule, canceling the committee meetings for the month of January, with support from Mr. Lanius. The motion passed unopposed.
- o Mr. Lanius moved to recommend that the agency keep the full Board informed on the repairs for the Hillsdale basement, with support from Mr. Houtz. The motion passed unopposed.

Public Comment: No public comments were given.

Mr. Lanius moved to adjourn the meeting, with support from Mr. Houtz. With no further business the meeting was adjourned at 9:38 AM.

Respectfully Submitted by:

Theresa Fisher,

Administrative Services Director Secretary to the Board of Health



December 4, 2024 – Board of Health Program, Policy, & Appeals Committee Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health, Program, Policy, & Appeals Committee meeting was called to order by Committee-Chair, Brent Leininger, at 8:32 AM. Roll call was completed as follows: Brent Leininger, Rusty Baker, and Jon Houtz. Tom Matthew was absent and Jon Houtz attended representing Branch Coutny.

Also present from BHSJ: Rebecca Burns, and Theresa Fisher

Mr. Baker moved to approve the agenda as presented, with support from Mr. Houtz. The motion passed unopposed.

Public Comment: No public comments were given.

New Business:

- The Health Officer Evaluation Policy and tool was reviewed by the group, but no action was taken.
- Mr. Houtz move to recommend the full Board approve all the he updates to the Personnel Policy Manual except those dealing with sick leave, with support from Mr. Baker. The motion passed unopposed.
- o The Board of Health meeting schedule for 2025 was discussed, but no action was taken.
- o The Board received an update regarding an EH appeal for a property located on Mudd lake.

Public Comment: No public comments were given.

With no further business, Mr. Baker moved to adjourn the meeting with support from Mr. Leininger. The motion passed unopposed and the meeting was adjourned at 9:21 AM.

Respectfully Submitted by:

Theresa Fisher,

Administrative Services Director Secretary to the Board of Health

BRANCH-HILLSDALE-ST.JOSEPH COMMUNITY HEALTH AGENCY

FISCAL YEAR 2024-25

Budget Amendment #1

December 12, 2025

BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY

TOTAL REVENUES

OCTOBER 2024- SEPTEMB Amendment #1 - 12/12/2024		s	TATE/FED		ELPHS		COUNTY APPROP		FEES OTHER		FUND BALANCE	Α	mended #1 BUDGET	DIFFERENCE		Original BUDGET
		\$	5,285,067	\$	1,555,867	\$	795,657	\$	1,552,714	\$	3,729,969	\$	12,919,274	\$ 526,302	\$	12,220,673
			40.9%		12.0%		6.2%		12.0%		28.9%					
OTHER:																
Salary/Fringe Payoff	800							\$	80,000			\$	80,000	\$ -	\$	80,000
Local Expenses unallowed by	015					\$	37,957					\$	37,957	\$ 21,210	\$	16,747
Capital Improvements	023	\$	-	\$	-	\$	78,000	\$	-			\$	78,000	\$5,000.00	\$	73,000
MERS Pension Underfunded	024					\$	22,590	\$	22,000	\$	-	\$	44,590	\$0.00	\$	44,590
Dental Clinic - St. Joseph Co.	021	\$	-	\$	-	\$	-	\$	60,000			\$	60,000	\$6,409.00	\$	53,591
	029	\$	-	\$	-	\$	-	\$	12,000			\$	12,000	(\$2,000.00)	\$	14,000
CSHCS Dontations - SJ	096							\$	20,574			\$	20,574	(\$15,290.00)	\$	35,864
CSHCS Dontations - BR/HD	097							\$	20,640			\$	20,640	(\$4,706.00)	\$	25,346
TOTAL OTHER		\$	-	\$	-	\$	138,547	\$	215,214	\$	-	\$ \$	353,761	\$ 10,623	\$	343,138
CORE SUPPORT SERVICES:																
General Administration	010	\$	-	\$	-	\$	-	\$	126,220			\$	126,220	\$40,000.00		86,220
Area Agency on Aging	012	\$	1,269,710	\$	-	\$	-	\$	85,975	\$	23,919	\$	1,379,604	(\$9,658.36)	\$	1,389,262
	014	\$	205,743	\$	-	\$	-					\$	205,743	\$0.00	\$	205,743
Emergency Preparedness	032	\$	130,932	\$	-	\$	52,022					\$	182,954	(\$145.00)	\$	183,099
Workforce Development	101	\$	48,535	\$	-	\$	2,493	\$	-			\$	51,028	(\$6,827.00)	\$	57,855
TOTAL CORE SUPPORT		\$	1,654,920	\$	-	\$	54,515	\$	212,195	\$	23,919	\$	1,945,549	\$23,369.64	\$	1,922,179
Budget Amendment #2																
	107	\$	7.465	\$	_	\$	7,464					\$	14.929	(\$1,635.00)	\$	16.564
	108	\$,	\$		\$	51,926	¢				\$	140,940	, , , , , , , , , , , , , , , , , , ,	\$	120,616
WIC - Women, Infants, & Chil		\$	908,156	\$	_	\$	203,089	\$	5,000	\$	50,000	\$	1,166,245	\$27,319.00	*	1,138,926
, ,	112	\$,	\$		\$	50,528	Ψ	3,000	Ψ	30,000	\$	78,502	(\$49,375.00)		127,877
	138	\$	932,186	\$	_	\$	9,628	\$	233,750	Ф	125,000	\$	1,300,564	(\$47,395.00)		1,347,959
Kindergarten Oral Health Scre		\$	82,619	Ψ	_	\$	1,966	Ψ	255,750	Ψ	123,000	\$	84,585	\$84,585.00		1,547,958
Children's Special Health Car		φ \$		\$		φ	1,900	\$				φ	222,409		\$	222,409
	326	φ \$,	\$	90,100	\$	2,821	\$	14,500			\$	124,921	·	\$	110,07
	327				90,100			φ \$						' '	Ф \$,
· ·	32 <i>1</i> 329	\$ \$	17,500 99,409	φ	90,100	\$	2,435	φ	13,000			\$ \$	123,035 99.409	\$13,985.00 \$51,451.00	Ф \$	109,050 47,958
J -		-	99,409	φ	170 724	Φ	1 501	φ	900			-	,	' '	-	
	331 332	\$ \$	20,000	\$ \$	170,734	\$	4,581 5,504		800			\$ \$	176,115 25,504	(\$2,337.00)	- :	178,452 34,556
		э \$,		-	ъ \$			250			\$ \$		(\$9,052.00)		,
Immunization Vaccine Handlin		*	39,814	\$	260 700		48,926	\$	250				88,990	, ,	\$	87,130
	341	\$	446	\$	369,700	\$	5,431		750			\$	376,327	(\$14,347.00)		390,674
	345	\$		\$	700 00 1	\$	16,351	\$	-	^	4== 000	\$	48,351	(\$28,939.00)		77,290
TOTAL PREVENTION		\$	2,496,492	\$	720,634	\$	410,650	\$	268,050	\$	175,000	\$	4,070,826	\$61,290.00	\$	4,009,536

HEALTH PROMOTION:																
Car seat	201	¢				\$	30.780	¢.				\$	30.780	\$1.090.00	\$	29,690
OHSP	201	\$ \$	70 221			ъ \$,	Ф	-			Ф \$	30,760 82.584	* *	Ф \$	29,690 82,102
	205	Ф	70,321			Ф \$	12,263	\$	32.140	c	83,459	\$ \$	62,564 115,599		*	,
MI Center Rural Health						Ф	-	Ф \$	- , -	Ф	63,439		,	(\$81,778.00)		197,377
Beacon Health	210	•	17.101			•	540	\$	20,000			\$	20,000	\$20,000.00	\$	-
Medical Marihuana BR	212	\$	17,191			\$	542					\$	17,733	, ,	\$	-
Medical Marihuana HD	230	\$	9,372			\$	294					\$	9,666	\$9,666.00	\$	-
Medical Marihuana SJ	275	\$	7,282			\$	185					\$	7,467	, ,	\$	-
Community Health Services		\$	-					\$	150,000			\$	150,000	¥-,::-	\$	143,538
HEP Special Projects	286					\$	764	\$	14,801			\$	15,565	, .,	\$	-
Grant Writing	405	\$	-			\$	3,246					\$	3,246	<u></u>	\$	1,988
TOTAL HEALTH PROMOTIO	N	\$	104,166	\$	-	\$	48,074	\$	216,941	\$	83,459	\$	452,640	(\$2,055.00)	\$	454,695
ENVIRONMENTAL HEALTH	PROTECTION	J														
Vector Borne Disease Surve		<u>.</u> \$	27,000	\$	_	\$	34,339					\$	61,339	\$ 27,275	\$	34,064
General Environmental Heal		\$	21,000	\$	_	\$	31,660	\$	1,000			\$	32,660	(\$8,297.00)		40,957
Food Protection	704	\$	_	\$	279,569	\$	9.041	\$	327,538			\$	616.148	(\$40,155.51)		656,304
Onsite Sewage	714	\$	12,000	-	279,832	\$	39,532	\$	132,000	\$	14,000	\$	477,364	(\$15,524.00)		492,888
EGLE LT Monitoring	715	\$	3,450	Ψ	270,002	\$	508	Ψ	102,000	Ψ	14,000	\$	3,958	(\$640.00)		4,598
EGLE Campground	716	\$	6,210			\$	167	\$	12,000			\$	18,377	(\$2,593.00)		20,970
EGLE Swimming	717	\$	4,150			\$	503	\$	12,000			\$	16,653	(\$213.00)		16,866
EGLE Septage	718	\$	3,000			\$	110	\$	3,200			\$	6,310	(\$803.00)		7,113
Body Art	719	\$	3,332			\$	2.351	\$	576			\$	6,259	(\$9,512.00)		15,771
EH Complaints	720	Ψ	0,002			\$	6,110	Ψ	0.0			\$	6,110	\$2,898.00		3,212
Drinking Water Supply	721	\$	_	\$	275.832	\$	11.179	\$	152,000	\$	14.000	\$	453,011	(\$38,233.00)		491.244
Type II Water	745	\$	217,736	Ψ.	2.0,002	\$	3,027	*	.02,000	Ψ	,000	\$	220,763	\$2,085.00		218,678
TOTAL ENVIRONMENTAL H		\$	276,878	\$	835,233	\$	138,527	\$	640,314	\$	28,000	\$	1,918,952			2,002,665
EMERGING ISSUES GRANT		_				_						_		,,	_	
PH Workforce Infastructure		\$	135,000			\$	967					\$	135,967	(\$981.00)		136,948
Epi Lab Capacity	351	\$	400,000			\$	-					\$	400,000	\$400,000.00	\$	-
COVID PH Workforce Deve		\$	66,263			\$	-					\$	66,263	, ,	\$	-
CDC COVID Immz	363	\$	135,350			\$	-					\$	135,350	(\$28,878.00)		164,228
PFAS - Lear Siegler	722	\$	1,329			\$	1,671					\$	3,000	\$1,375.00		1,625
PFAS - White Pigeon	723	\$	8,042			\$	1,658					\$	9,700	\$1,586.00		8,114
PFAS - Westside Landfill	724	\$	6,627	•		\$	1,048	•		•		\$	7,675	(\$552.00)		8,227
TOTAL EMERGING ISSUE G	SKAN IS		752,611		-	\$	5,344	\$	-	\$	-	\$	757,955	\$438,813.00	>	319,142
FUND BALANCE / SURPLUS	REVENUE:															
Nonspendable										\$	42,256	\$	42,256	\$0.00	\$	42,256
Assigned										\$	2,991,667	\$	2,819,368	\$77,974.36	\$	2,741,394
Unassigned										\$	385,668	\$	385,668	\$0.00	\$	385,668
TOTAL UNSPENT FUND BA	LANCE									\$	3,419,591	\$	3,247,292	\$77,974.36	\$	3,169,318
		Tota		Allo	cated for Use	Una	llocated									
Total Amended #2 Budge	t Revenues	\$	12,746,975	\$	9,499,683	\$	3,247,292					TOT	TAL LOCAL DO	OLLARS TO AGEN	ICY	FY 2023-24
Total Amended #1 Budge	t Revenues	\$	12,220,673	\$	9,051,355	\$	3,169,318								\$	795,657.00
Difference		\$	526,302	\$	448,328	\$	77,974									•
=		-	, <u>-</u>				, +	•								

BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY OCTOBER 2024- SEPTEMBER 2025 Budget Amendment #1

TOTAL EXPENSES

Budget Amendment #1					
		Orig Budget 2024-25		Amended #1 Budget 2024-25	DIFFERENCE
	\$	12,220,674	\$	12,746,974	526,300
OTHER.	-	12,220,674	Ψ	12,740,374	526,300
OTHER:	Ф	90,000	Ф	90,000	0
Salary/Fringe Payoff	\$	80,000	\$	80,000	
Local Expenses Unallowed by Grants	\$	16,747	\$	37,957	21,210
Capital Improvements	\$	73,000	\$	78,000	5,000
MERS Pension Underfunded	\$ \$ \$	44,590	\$	44,590	0
Dental Clinic - St. Joseph Co.	\$	53,591	\$	60,000	6,409
Dental Clinic - Hillsdale Co.	\$	14,000	\$	12,000	(2,000)
CSHCS Donations - SJ		35,864	\$	20,574	(15,290)
CSHCS Donations - BR/HD	\$ \$	25,346	\$	20,640	(4,706)
TOTAL OTHER	<u>\$</u>	343,138	\$	353,762	\$ 10,624
CORE SUPPORT SERVICES:				400.000	40.000
General Administration	\$	86,220	\$	126,220	40,000
Area Agency on Aging	\$	1,389,262	\$	1,379,603	(9,659)
VOCA	\$ \$	205,743	\$	205,743	0
Emergency Preparedness	\$	183,099	\$	182,954	(145)
Workforce Development	\$	57,855	\$	51,028	(6,827)
TOTAL CORE SUPPORT	\$	1,922,179	\$	1,945,548	\$ 23,369
Budget Amendment #2	_				
Medicaid Outreach	\$	16,564	\$	14,929	(1,635)
WIC - Breastfeeding	\$	120,616	\$	140,940	20,324
WIC - Women, Infants, & Children	\$	1,138,926	\$	1,166,245	27,319
CSHCS Medicaid Outreach	\$	127,877	\$	78,502	(49,375)
Immunization Clinics	\$	1,347,959	\$	1,300,564	(47,395)
Immunization/Vaccine Handling	\$	87,130	\$	88,990	1,860
Children's Special Health Care Services	\$	222,409	\$	222,409	0
School Vision & Hearing Clinics	\$ \$ \$	219,125	\$	247,956	28,831
MCH Enabling Children	\$	47,958	\$	99,409	51,451
STD Prevention & Control	\$	178,452	\$	176,115	(2,337)
HIV Prevention & Control	\$	34,556	\$	25,504	(9,052)
Infectious Disease	\$	390,674	\$	376,327	(14,347)
Lead Testing	\$ \$ \$	77,290	\$	48,351	(28,939)
Kindergarten Oral Health Screening	\$	-	\$	82,584	82,584
TOTAL PREVENTION	\$	4,009,536	\$	4,068,825	\$ 59,289

HEALTH PROMOTION:				
Car seat	\$ 29,690	\$ 30,780	1,090	
OHSP	\$ -	\$ 84,586		
Beacon Health	\$ -	\$ 20,000		
Medical Marihuana BR	\$ -	\$ 17,732	17,732	
Medical Marihuana HD	\$ -	\$ 9,666	9,666	
Medical Marihuana SJ	\$ -	\$ 7,466	7,466	
Community Stabilization (Marketing)	\$ 82,102	\$ -	(82,102)	
Community Health Services	\$ 143,538	\$ 150,000	6,462	
HEP Special Projects		\$ 15,565		
MI Center Rural Health	\$ 197,377	\$ 115,599	(81,778)	
Grant Writing	\$ 1,988	\$ 3,246	1,258	
TOTAL HEALTH PROMOTION	\$ 454,695	\$ 454,641	\$ (54)	
				-
ENVIRONMENTAL HEALTH PROTECTION				
Vector Borne	\$ 34,064	\$ 61,339	27,275	
General Environmental Health	\$ 40,957	\$ 32,660	(8,297)	
Food Protection	\$ 656,304	\$ 616,147	(40,157)	
Onsite Sewage	\$ 492,888	\$ 477,364	(15,524)	
Drinking Water Supply	\$ 491,244	\$ 453,012	(38,233)	
EGLE LT Monitoring	\$ 4,598	\$ 3,958	(640)	
EGLE Campground	\$ 20,970	\$ 18,377	(2,593)	
EGLE Swimming	\$ 16,866	\$ 16,653	(213)	
EGLE Septage	\$ 7,113	\$ 6,310	(803)	
Body Art	\$ 15,771	\$ 6,259	(9,512)	
EH Complaints	\$ 3,212	\$ 6,110	2,898	
Type II Water	\$ 218,678	\$ 220,763	2,085	_
TOTAL ENVIRONMENTAL HEALTH	\$ 2,002,666	\$ 1,918,952	\$ (83,714)	
EMERGING ISSUES GRANTS				
PH Workforce Infastructure	\$ 136,948	\$ 135,967	(981)	
Epi Lab Contact Tracing, CI, TC, VM, WA Se	-	\$ 400,000	400,000	
COVID PH Workforce Development	\$ -	\$ 66,263	66,263	
CDC COVID-19 Immz	\$ 164,228	\$ 135,350	(28,878)	
PFAS - Lear Siegler	\$ 1,625	\$ 3,000	1,375	
PFAS - White Pigeon	\$ 8,114	\$ 9,700	1,586	Total Allocated
PFAS - Westside Landfill	\$ 8,227	\$ 7,675	(552)	
TOTAL EMERGING ISSUES GRANTS	\$ 319,142	\$ 757,955	\$ 438,812	\$ 9,499,682
	\$ 9,051,356			
UNALLOCATED FUND BALANCE:				
Nonspendable	\$ 42,256	\$ 42,256	0	
Assigned	\$ 2,741,394	\$ 2,819,368	77,974	Total Reserved
Unassigned	\$ 385,668	\$ 385,668	0	For Future Use
TOTAL UNALLOCATED FUND BALAN	\$ 3,169,318	\$ 3,247,292	\$ 77,974	\$ 3,247,292

Prepared By: Theresa Fisher

Approved By: Board of Health

10/1/2024 - 3/30/2023	008	009	010	012	014	015
	SALARY/FRINGE	SPACE	GENERAL	AREA AGENCY	VOCA	LOCAL
PROGRAM EXPENSES	PAYOFF	ALLOCATION	DMINISTRATIO	ON AGING		EXPENSES
1. SALARIES & WAGES	80.000		486,705	209,218	100,914	
2. FRINGE BENEFITS			755,014	105,050	39,546	
3. CAP EXP FOR EQUIP & FAC						
4. CONTRACTUAL (SUBCONTRACTS)				914,983	1,500	
5. SUPPLIES & MATERIALS			29,000	2,900	750	
6. TRAVEL			12,000	12,000	8,500	
7. COMMUNICATION 8. COUNTY/CITY CENTRAL SERVICES			20,000	3,000	600	
9. SPACE COSTS		286,164				
SPACE ALLOCATION		(286,164)	115,400	5,279	2.092	
10. ALL OTHERS (ADP & MISC.)		(===; ===)	184,500	20,128	3,998	22,957
TOTAL PROGRAM EXPENSES	80,000	-	1,602,618	1,272,559	157,900	22,957
1. INDIRECT COST		-	(1,476,398)	107,045	47,843	-
34.06160%						
2. COST ALLOCATION PLAN/OTHER						
COMMUNITY HEALTH SERVICES						
PREVENTION SERVICES IMMUNIZATION DISTRIBUTION						
CSHCS DISTRIBUTION						
ENVIRONMENTAL HEALTH						
ALLOCATION EXPENSE						15,000
TOTAL INDIRECT COST	-	-	(1,476,398)	107,045	47,843	15,000
UNALLOCATED FUND BALANCE						
TOTAL EXPENDITURES	80,000	-	126,220	1,379,603	205,743	37,957
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND PA	ARTY		40			
2. FEES & COLLECTIONS - 3RD PARTY						
3. FED/STATE FUNDING (NON-MDHHS)				1,269,710	205,743	
4. FEDERAL MEDICAID COST BASED RE	IMB			1,209,710	200,740	
5. FEDERALLY PROVIDED VACCINES						
6. FEDERAL MEDICAID OUTREACH						
7. REQUIRED MATCH - LOCAL						
8. LOCAL - NON ELPHS				35,902		
9. LOCAL - NON ELPHS				25,073		
10. LOCAL - NON ELPHS	00.000		400 400	25.000		
11. OTHER - NON ELPHS	80,000		126,180	25,000		
12. MDHHS NON COMPREHENSIVE	<u> </u> 		<u> </u> 			
13. MDHHS COMPREHENSIVE						
14. ELPHS MDHHS HEARING						
15. ELPHS MDHHS VISION						
16. ELPHS MDHHS OTHER						
17. ELPHS FOOD						
18. ELPHS PRIVATE/TYPE III WATER						
19. ELPHS ON-SITE WASTEWATER TREA	AINENI					
20. MCH FUNDING						
21. LOCAL - COUNTY APPROPRATIONS					-	37,957
22. INKIND MATCH						•
23. MDHHS FIXED UNIT RATE						
MDHHS LOCAL COMM STABLIZATION						
COURCE OF FUNDS ARCY (T	00.000		400.000	4.055.005	005.746	07.055
SOURCE OF FUNDS ABOVE	80,000	-	126,220	1,355,685	205,743	37,957
USE OF DESIGNATED FUND BALANCE	-	-	-	23,919	0	-
UNAPPROPRIATED FUND BALANCE				23,919		
TOTAL SOURCE OF FUNDS IN BUDGET	80,000		126,220	1,379,603	205,743	37,957
	50,000		120,220	1,010,000	200,140	01,001

10/1/2024 - 9/30/2025		T				
	021	023	024	025	029	032 - 9 Mth
	DENTAL CLINIC	CAPITAL	MERS PENSION	H WORKFORCI	DENTAL CLINIC	PUBLIC HEALTH
PROGRAM EXPENSES	THREE RIVERS	IMPROVEMENT	UNDERFUNDED	NFASTRUCTURI	HILLSDALE	EMERG. PREP.
	THREE THE ETC	iiii itoveiiieiti	ONDER ONDED		11122057122	
1. SALARIES & WAGES 2. FRINGE BENEFITS			44.590	25 2,942		57,950 26,659
3. CAP EXP FOR EQUIP & FAC		78,000	44,590	2,942		20,039
4. CONTRACTUAL (SUBCONTRACTS)		70,000				
5. SUPPLIES & MATERIALS						4,400
6. TRAVEL						3,000
7. COMMUNICATION						12,000
8. COUNTY/CITY CENTRAL SERVICES						12,000
9. SPACE COSTS						
SPACE ALLOCATION	_	-	_		-	931
10. ALL OTHERS (ADP & MISC.)	60,000			133,000	12,000	4,050
TOTAL PROGRAM EXPENSES	60,000	78,000	44,590	135,967	12,000	108,990
	,	,	,	,	,	,
1. INDIRECT COST					-	28,819
34.06160%						
2. COST ALLOCATION PLAN/OTHER						
COMMUNITY HEALTH SERVICES						
PREVENTION SERVICES						
IMMUNIZATION DISTRIBUTION						
CSHCS DISTRIBUTION						
ENVIRONMENTAL HEALTH						
ALLOCATION EXPENSE						
TOTAL INDIRECT COST	-	-	-	-	-	28,819
UNALLOCATED FUND BALANCE						.,
TOTAL EXPENDITURES	60,000	78,000	44,590	135,967	12,000	137,809
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND PA	i					
2. FEES & COLLECTIONS - 3RD PARTY						
3. FED/STATE FUNDING (NON-MDHHS)						
4. FEDERAL MEDICAID COST BASED RE						
5. FEDERALLY PROVIDED VACCINES						
6. FEDERAL MEDICAID OUTREACH						
7. REQUIRED MATCH - LOCAL						9,820
8. LOCAL - NON ELPHS						
9. LOCAL - NON ELPHS						
10. LOCAL - NON ELPHS	60,000				12,000	
11. OTHER - NON ELPHS	,		22,000		,	
12. MDHHS NON COMPREHENSIVE						
13. MDHHS COMPREHENSIVE				135,000		98,199
14. ELPHS MDHHS HEARING						
15. ELPHS MDHHS VISION						
16. ELPHS MDHHS OTHER						
17. ELPHS FOOD						
18. ELPHS PRIVATE/TYPE III WATER						
19. ELPHS ON-SITE WASTEWATER TREA	4					
20. MCH FUNDING						
21. LOCAL - COUNTY APPROPRATIONS		78,000	22,590	967		29,790
22. INKIND MATCH						
23. MDHHS FIXED UNIT RATE						
MDHHS LOCAL COMM STABLIZATION						
SOURCE OF FUNDS ABOVE	60,000	78,000	44,590	135,967	12,000	137,809
	-	-	-	-	-	(0
USE OF DESIGNATED FUND BALANCE			-			
UNAPPROPRIATED FUND BALANCE						
TOTAL SOURCE OF FUNDS IN BUDGET	60,000	78,000	44,590	135,967	12,000	137,809

10/1/2024 - 9/30/2025	20 0 8541	25	00	07	404	407
	32 - 3 Mth	35 (ECTOR ROPA)	96	97	101	107
	PUBLIC HEALTH		CSHCS	CSHCS	WORKFORCE	MEDICAID
PROGRAM EXPENSES	EMERG. PREP.	DISEASE	DONATIONS	DONATIONS	DEVELOPMENT	OUTREACH
1. SALARIES & WAGES 2. FRINGE BENEFITS	19,317 8,886	37,196 3,397			4,123 1,273	5,643 1,416
3. CAP EXP FOR EQUIP & FAC	0,000	3,391			1,273	1,410
4. CONTRACTUAL (SUBCONTRACTS)						
5. SUPPLIES & MATERIALS	625	60			24	75
6. TRAVEL	1,000	6,000			24	50
7. COMMUNICATION 8. COUNTY/CITY CENTRAL SERVICES	4,000	25			24	25
9. SPACE COSTS						
SPACE ALLOCATION	310	34			72	111
10. ALL OTHERS (ADP & MISC.)	1,400	800	20,574	20,640	43,650	375
TOTAL PROGRAM EXPENSES	35,538	47,512	20,574	20,640	49,190	7,695
1. INDIRECT COST	9,606	13,827			1,838	2,404
34.06160%		- , -			,	, -
2. COST ALLOCATION PLAN/OTHER						
COMMUNITY HEALTH SERVICES						4,293
PREVENTION SERVICES IMMUNIZATION DISTRIBUTION	1					537
CSHCS DISTRIBUTION						
ENVIRONMENTAL HEALTH						
ALLOCATION EXPENSE						
TOTAL INDIRECT COST UNALLOCATED FUND BALANCE	9,606	13,827			1,838	7,234
TOTAL EXPENDITURES	45,144	61,339	20,574	20,640	51,028	14,929
		,	<u> </u>	,		<u> </u>
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND P.	A					
2. FEES & COLLECTIONS - 3RD PARTY						
3. FED/STATE FUNDING (NON-MDHHS)						
4. FEDERAL MEDICAID COST BASED RE						
5. FEDERALLY PROVIDED VACCINES						
6. FEDERAL MEDICAID OUTREACH						7,464
7. REQUIRED MATCH - LOCAL	3,273					7,464
8. LOCAL - NON ELPHS	0,210					7,404
9. LOCAL - NON ELPHS						
10. LOCAL - NON ELPHS						
11. OTHER - NON ELPHS			20,574	20,640		
12. MDHHS NON COMPREHENSIVE						
13. MDHHS COMPREHENSIVE	32,733	27,000			48,535	-
14. ELPHS MDHHS HEARING	1					
15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER						
17. ELPHS FOOD						
18. ELPHS PRIVATE/TYPE III WATER						
19. ELPHS ON-SITE WASTEWATER TRE	4			· · · · · ·		
20. MCH FUNDING						
20. MICH I GINDING						
21. LOCAL - COUNTY APPROPRATIONS	9,138	34,339			2,493	
22. INKIND MATCH						
23. MDHHS FIXED UNIT RATE						
MDHHS LOCAL COMM STABLIZATION						
	 					
SOURCE OF FUNDS ABOVE	45,145	61,339	20,574	20,640	51,028	14,929
	(0)	-	-	-	0	-
USE OF DESIGNATED FUND BALANCE						
UNAPPROPRIATED FUND BALANCE TOTAL SOURCE OF FUNDS IN BUDGET	45,145	61,339	20,574	20,640	51,028	14,929
TOTAL SOURCE OF FUNDS IN BUDGET	45, 145	01,339	20,374	20,040	51,020	14,929

10/1/2024 - 9/30/2025	400	400	440	400	400	204
	108	109	112 CSHCS	138	199	201
,	WIC	WIC	MEDICAID	IMMUNIZATION/	PREVENTION	CARSEAT
PROGRAM EXPENSES	BREASTFEEDING	RESIDENTIAL	OUTREACH	IAP	SERV ADM.	
1. SALARIES & WAGES	68,095	546,921		312,923	69,778	18,386
2. FRINGE BENEFITS	10,134	172,889		118,560	13,660	1,512
3. CAP EXP FOR EQUIP & FAC						
4. CONTRACTUAL (SUBCONTRACTS)						
5. SUPPLIES & MATERIALS	900	16,000		350,000	425	100
6. TRAVEL 7. COMMUNICATION	2,500 1,050	10,000 23,000		6,000 11,500	2,000 500	3,200 300
8. COUNTY/CITY CENTRAL SERVICES	1,030	23,000		11,500	500	300
9. SPACE COSTS						
SPACE ALLOCATION	5,875	31,790	=	16,013	43,179	4
10. ALL OTHERS (ADP & MISC.)	22,500	61,450		346,200	2,050	500
TOTAL PROGRAM EXPENSES	111,054	862,050	-	1,161,196	131,592	24,002
1. INDIRECT COST	26,646	245,179	-	146,970	28,420	6,778
34.06160%				1		
2. COST ALLOCATION PLAN/OTHER COMMUNITY HEALTH SERVICES	4,293	4,293		4,293		
PREVENTION SERVICES	4,293 5,947	4,293 54,724		32,804	(160,013)	
IMMUNIZATION DISTRIBUTION	3,347	J 4 ,124		J2,004 -	(100,013)	
CSHCS DISTRIBUTION			78,502			
ENVIRONMENTAL HEALTH			-,			
ALLOCATION EXPENSE	(7,000)			(44,699)		
TOTAL INDIRECT COST	29,886	304,195	78,502	139,368	(131,592)	6,778
UNALLOCATED FUND BALANCE						
TOTAL EXPENDITURES	140,940	1,166,245	78,502	1,300,564	-	30,780
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND PA		F 000		7,500	-	
2. FEES & COLLECTIONS - 3RD PARTY		5,000		223,750	-	
3. FED/STATE FUNDING (NON-MDHHS)						
4. FEDERAL MEDICAID COST BASED RE		-		556,808		
5. FEDERALLY PROVIDED VACCINES				300,000		
6. FEDERAL MEDICAID OUTREACH			27,974			
7. REQUIRED MATCH - LOCAL			27,974			
8. LOCAL - NON ELPHS						
9. LOCAL - NON ELPHS						
10. LOCAL - NON ELPHS				2.500		
11. OTHER - NON ELPHS				2,500		
12. MDHHS NON COMPREHENSIVE	_			<u> </u>	<u> </u>	
13. MDHHS COMPREHENSIVE	89,014	908,156		75,378		
14. ELPHS MDHHS HEARING						
15. ELPHS MDHHS VISION						
16. ELPHS MDHHS OTHER				<u> </u>		
17. ELPHS FOOD						
18. ELPHS PRIVATE/TYPE III WATER				1		
19. ELPHS ON-SITE WASTEWATER TREA						
20. MCH FUNDING				1		
				1		
21. LOCAL - COUNTY APPROPRATIONS	51,926	203,089	22,554	9,628		30,780
22. INKIND MATCH	,	<u> </u>				
23. MDHHS FIXED UNIT RATE						
MDHHS LOCAL COMM STABLIZATION						
COLUDER OF FUNDS ADOLES	440.040	4.440.045	70 500	4 475 50 1		00 702
SOURCE OF FUNDS ABOVE	140,940	1,116,245	78,502	1,175,564	-	30,780
USE OF DESIGNATED FUND BALANCE	(0)	50,000	-	125,000	-	<u> </u>
UNAPPROPRIATED FUND BALANCE		30,000		123,000		
TOTAL SOURCE OF FUNDS IN BUDGET	140,940	1,166,245	78,502	1,300,564	_	30,780
. T I COUNTED OF TONDO IN DODOLT	140,040	1,100,240	70,002	1,000,004		00,700

10/1/2024 - 9/30/2025	202	205	207	210	212	230
	KINDERGARTEN	OHSP	MI CENTER	Beacon Health	MARIJUANA	MARIJUANA
PROGRAM EXPENSES	ORAL HEALTH		RURAL HEALTH	! 	BRANCH	HILLSDALE
1. SALARIES & WAGES	6,304	33,155	51,991	_	3,273	1,637
2. FRINGE BENEFITS	1,889	16,290	18,704	-	1,699	849
3. CAP EXP FOR EQUIP & FAC						
4. CONTRACTUAL (SUBCONTRACTS)	0.000	5 404	4 400			
5. SUPPLIES & MATERIALS 6. TRAVEL	8,000 3,000	5,401 1,654	1,100 5,000	-	- 25	- 25
7. COMMUNICATION	500	- 1,034	2,000	-	25	-
8. COUNTY/CITY CENTRAL SERVICES	333		2,000			
9. SPACE COSTS						
SPACE ALLOCATION	86	241	832	-	17	9
10. ALL OTHERS (ADP & MISC.)	57,100	9,000	7,600	20,000	11,000	6,300
TOTAL PROGRAM EXPENSES	76,879	65,742	87,227	20,000	16,039	8,819
1. INDIRECT COST	2,791	16,842	24,080	-	1,693	847
34.06160%			2.,000		.,000	
2. COST ALLOCATION PLAN/OTHER						
COMMUNITY HEALTH SERVICES	4,293		4,293			
PREVENTION SERVICES	623					
IMMUNIZATION DISTRIBUTION CSHCS DISTRIBUTION						
ENVIRONMENTAL HEALTH	+					
ALLOCATION EXPENSE						
TOTAL INDIRECT COST	7,706	16,842	28,372	-	1,693	847
UNALLOCATED FUND BALANCE						
TOTAL EXPENDITURES	84,586	82,584	115,599	20,000	17,732	9,666
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND PARTY 2. FEES & COLLECTIONS - 3RD PARTY			2,500			
2. TEEG & GOLLEGIIGNO - GRET ARTT			2,000			
3. FED/STATE FUNDING (NON-MDHHS)		70,321			17,191	9,372
4. FEDERAL MEDICAID COST BASED RE						
5. FEDERALLY PROVIDED VACCINES						
6. FEDERAL MEDICAID OUTREACH						
7. REQUIRED MATCH - LOCAL						
8. LOCAL - NON ELPHS						
9. LOCAL - NON ELPHS						
10. LOCAL - NON ELPHS						
11. OTHER - NON ELPHS			29,640	20,000		
12. MDHHS NON COMPREHENSIVE						
13. MDHHS COMPREHENSIVE	82,619					
	52,010					
14. ELPHS MDHHS HEARING						
15. ELPHS MDHHS VISION						
16. ELPHS MDHHS OTHER 17. ELPHS FOOD						
18. ELPHS PRIVATE/TYPE III WATER						
19. ELPHS ON-SITE WASTEWATER TREA	4					
20. MCH FUNDING						
21. LOCAL - COUNTY APPROPRATIONS	1,967	12,263	-	-	541	294
22. INKIND MATCH 23. MDHHS FIXED UNIT RATE						
EG. MIDITIO LIALD UNIT RATE						
MDHHS LOCAL COMM STABLIZATION						
SOURCE OF FUNDS ABOVE	84,586	82,584	32,140	20,000	17,732	9,666
HOE OF DECICNATED FUND DALANCE			0		0	0
USE OF DESIGNATED FUND BALANCE UNAPPROPRIATED FUND BALANCE			83,459			
TOTAL SOURCE OF FUNDS IN BUDGET	84.586	82.584	115.599		17,732	9,666
	04,560 0024 12 12 DOI	- ,	-,		11,132	9,000

10/1/2024 - 9/30/2025	255	275	286	325	326	327
	COMMUNITY		HEP Special	CSHCS OR &	VISION	
PROCEAN EXPENSES	i	MARIJUANA	·		VISION	HEARING
PROGRAM EXPENSES	EALTH SERVICE	ST JOSEPH	Projects	ADVOCACY	50.440	54.000
1. SALARIES & WAGES 2. FRINGE BENEFITS	110,121 43,868	1,637 849	2,805 1,291	147,544 41,495	52,448 20,942	51,000 21,077
3. CAP EXP FOR EQUIP & FAC	43,000	049	1,231	41,495	20,342	21,011
4. CONTRACTUAL (SUBCONTRACTS)						
5. SUPPLIES & MATERIALS	475	-	250	3,450	2,025	1,025
6. TRAVEL	5,000	25	300	5,000	3,200	3,000
7. COMMUNICATION	500	-	-	1,350	300	300
8. COUNTY/CITY CENTRAL SERVICES						
9. SPACE COSTS SPACE ALLOCATION	1,462	9	23	2,968	1,623	1,597
10. ALL OTHERS (ADP & MISC.)	7,050	4,100	9,500	16,050	9,850	11,050
TOTAL PROGRAM EXPENSES	168,477	6,619	14,170	217,857	90,387	89,049
1. INDIRECT COST	52,451	847	1,395	64,390	24,998	24,551
2. COST ALLOCATION PLAN/OTHER						
COMMUNITY HEALTH SERVICES	(70,928)			4,293	4,293	4,293
PREVENTION SERVICES	(10,020)			14,372	5,243	5,143
IMMUNIZATION DISTRIBUTION				-,	-,	-,
CSHCS DISTRIBUTION				(78,502)	_	
ENVIRONMENTAL HEALTH						
ALLOCATION EXPENSE						
TOTAL INDIRECT COST	(18,477)	847	1,395	4,552	34,533	33,986
UNALLOCATED FUND BALANCE TOTAL EXPENDITURES	150,000	7,466	15,565	222,409	124,921	123,036
TOTAL EXILENSITORES	100,000	7,400	10,000	222,700	124,021	120,000
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND PA					14,500	13,000
2. FEES & COLLECTIONS - 3RD PARTY						
3. FED/STATE FUNDING (NON-MDHHS)		7,282				
4. FEDERAL MEDICAID COST BASED RE					17,500	17,500
5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH						
6. FEDERAL MEDICAID OUTREACH						
7. REQUIRED MATCH - LOCAL					2,821	2,436
8. LOCAL - NON ELPHS						
9. LOCAL - NON ELPHS						
10. LOCAL - NON ELPHS			44.004			
11. OTHER - NON ELPHS			14,801			
12. MDHHS NON COMPREHENSIVE						
13. MDHHS COMPREHENSIVE				142,409		
				<u> </u>		
14. ELPHS MDHHS HEARING						90,100
15. ELPHS MDHHS VISION					90,100	
16. ELPHS MDHHS OTHER						
17. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER						
19. ELPHS ON-SITE WASTEWATER TREA	 					
20. MCH FUNDING						
24 LOCAL COUNTY APPROPRATIONS		40.1	70.1			
21. LOCAL - COUNTY APPROPRATIONS 22. INKIND MATCH		184	764	-	-	<u>-</u>
23. MDHHS FIXED UNIT RATE				80,000		
	<u> </u>					
MDHHS LOCAL COMM STABLIZATION	150,000					
SOURCE OF FUNDS ABOVE	450,000	7.400	45.505	222 400	104.004	400.000
SOURCE OF FUNDS ABOVE	150,000	7,466 0	15,565	222,409	124,921	123,036
USE OF DESIGNATED FUND BALANCE	-	0		(0)	(0)	-
UNAPPROPRIATED FUND BALANCE						
TOTAL SOURCE OF FUNDS IN BUDGET	150,000	7,466	15,565	222,409	124,921	123,036

10/1/2024 - 9/30/2025	329	331	332	338	341	345
	MCH - ENABLING	EXUAL TRANS.	HIV	IMMUNIZATION/	INFECTIOUS	LEAD
PROGRAM EXPENSES	ERVICES CHILDRE		PREVENTION	ACCINE HANDLIN	DISEASE	TESTING
1. SALARIES & WAGES	_	69,015	10,102	36,562	168,235	39,734
2. FRINGE BENEFITS	-	22,468	3,448	13,745	49,867	19,050
3. CAP EXP FOR EQUIP & FAC		,	-, -	-, -	, , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4. CONTRACTUAL (SUBCONTRACTS)						
5. SUPPLIES & MATERIALS	-	4,700	200	650	11,720	5,800
6. TRAVEL	-	1,000	100	600	1,500	2,000
7. COMMUNICATION	-	700	50	2,500	1,000	1,150
8. COUNTY/CITY CENTRAL SERVICES						
9. SPACE COSTS SPACE ALLOCATION	_	5,524	166	3.372	8.542	617
10. ALL OTHERS (ADP & MISC.)	-	30,300	1,500	10,250	40,300	925
TOTAL PROGRAM EXPENSES	-	133,707	15,566	67,679	281,164	69,276
		,		,	,	•
1. INDIRECT COST	-	31,161	4,615	17,135	74,289	20,023
34.06160%						
2. COST ALLOCATION PLAN/OTHER						
COMMUNITY HEALTH SERVICES	-	4,293	4,293	-	4,293	
PREVENTION SERVICES	-	6,955	1,030	4,176	16,581	4,469
IMMUNIZATION DISTRIBUTION				-		4.000
CSHCS DISTRIBUTION						4,293
ENVIRONMENTAL HEALTH ALLOCATION EXPENSE	99,409					(49,710)
TOTAL INDIRECT COST	99,409	42,408	9,938	21,311	95,163	(20,926)
UNALLOCATED FUND BALANCE	33,403	72,700	3,330	21,511	33,103	(20,320)
TOTAL EXPENDITURES	99,409	176,115	25,504	88,990	376,327	48,351
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND PA	•	800		-	250	
2. FEES & COLLECTIONS - 3RD PARTY				-	500	
3. FED/STATE FUNDING (NON-MDHHS)						
4. FEDERAL MEDICAID COST BASED RE						20,000
5. FEDERALLY PROVIDED VACCINES						
6. FEDERAL MEDICAID OUTREACH						
7. REQUIRED MATCH - LOCAL						
8. LOCAL - NON ELPHS						
9. LOCAL - NON ELPHS						
10. LOCAL - NON ELPHS						
11. OTHER - NON ELPHS				250		
12. MDHHS NON COMPREHENSIVE					-	
13. MDHHS COMPREHENSIVE			20,000	29,814	446	
44 ELDUC MOULO LICADINO			<u> </u>			
14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION						
16. ELPHS MDHHS OTHER		170,734		-	369,700	
17. ELPHS FOOD		170,704			335,700	
18. ELPHS PRIVATE/TYPE III WATER			1			
19. ELPHS ON-SITE WASTEWATER TREA	•					
20. MCH FUNDING	99,409					
21. LOCAL - COUNTY APPROPRATIONS	-	4,581	5,504	48,926	5,431	16,351
22. INKIND MATCH				40.000		10.000
23. MDHHS FIXED UNIT RATE			<u> </u>	10,000		12,000
MDHHS LOCAL COMM STABLIZATION						
MIDITIO LOCAL CONTINI STABLIZATION			<u> </u>			
SOURCE OF FUNDS ABOVE	99,409	176,115	25,504	88,990	376,327	48,351
	-	-		-	-	-
USE OF DESIGNATED FUND BALANCE						
UNAPPROPRIATED FUND BALANCE						
TOTAL SOURCE OF FUNDS IN BUDGET	99,409	176,115	25,504	88,990	376,327	48,351

10/1/2024 - 9/30/2025	054	055	200	074	405	
	351	355	363	371	405	605
i i	EPI LAB CAP	COVID PH	CDC	CSHCS	GRANT	GENERAL
PROGRAM EXPENSES		ORKFORCE DEVI	COVID IMMZ	VACCINE	WRITING	ENVIRO. HEALTH
1. SALARIES & WAGES	47,421	-	23,977	-	1,311	177,349
FRINGE BENEFITS CAP EXP FOR EQUIP & FAC	15,605	-	10,446	-	594	61,960
4. CONTRACTUAL (SUBCONTRACTS)						
5. SUPPLIES & MATERIALS	14,500	2,000	3,300		25	5,600
6. TRAVEL	4,000	6,000	7,000	-	25	8,000
7. COMMUNICATION	4,000	500	5,500	-	25	1,000
8. COUNTY/CITY CENTRAL SERVICES						
9. SPACE COSTS						
SPACE ALLOCATION	587	-	1,241	-	18	10,805
10. ALL OTHERS (ADP & MISC.) TOTAL PROGRAM EXPENSES	287,628 373.741	57,763 66,263	65,250 116,715	-	600 2,598	42,850 307,564
TOTAL FROGRAM EXPENSES	373,741	00,203	110,713	-	2,390	307,304
1. INDIRECT COST	21,467	-	11,725	-	649	81,512
34.06160%						
2. COST ALLOCATION PLAN/OTHER						
COMMUNITY HEALTH SERVICES	-		4,293			4,293
PREVENTION SERVICES	4,792		2,617			
IMMUNIZATION DISTRIBUTION CSHCS DISTRIBUTION						
ENVIRONMENTAL HEALTH						(360,709)
ALLOCATION EXPENSE						(550,759)
TOTAL INDIRECT COST	26,259	-	18,635	-	649	(274,904)
UNALLOCATED FUND BALANCE						
TOTAL EXPENDITURES	400,000	66,263	135,350	-	3,246	32,660
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND PA						
2. FEES & COLLECTIONS - 3RD PARTY						
3. FED/STATE FUNDING (NON-MDHHS)						
4. FEDERAL MEDICAID COST BASED RE						
5. FEDERALLY PROVIDED VACCINES						
6. FEDERAL MEDICAID OUTREACH						
T DECUMPED MATCH LOCAL						
7. REQUIRED MATCH - LOCAL						
8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS						
10. LOCAL - NON ELPHS						
11. OTHER - NON ELPHS						1,000
12. MDHHS NON COMPREHENSIVE	400,000	66,263	135,350			
13. MDHHS COMPREHENSIVE				-		
14 EL DUE MOULE LEADING						
14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION						
16. ELPHS MDHHS VISION						
17. ELPHS FOOD						
18. ELPHS PRIVATE/TYPE III WATER						
19. ELPHS ON-SITE WASTEWATER TREA						
20. MCH FUNDING						
21. LOCAL - COUNTY APPROPRATIONS	-	_	-	_	3,246	31,660
22. INKIND MATCH					5,2-10	31,000
23. MDHHS FIXED UNIT RATE						
MDHHS LOCAL COMM STABLIZATION						
SOURCE OF EUNDS ABOVE	400.000	00.000	405.050		2.040	20.000
SOURCE OF FUNDS ABOVE	400,000	66,263	135,350	-	3,246	32,660
USE OF DESIGNATED FUND BALANCE	0	-	0	-	-	-
UNAPPROPRIATED FUND BALANCE						
TOTAL SOURCE OF FUNDS IN BUDGET	400,000	66,263	135,350	_	3,246	32,660
	,		,		-,0	,,

10/1/2024 - 9/30/2025	704	714	715	716	717	718
	FOOD	NSITE SEWAGI	EGLE	EGLE	EGLE	EGLE
PROGRAM EXPENSES	PROTECTION	DISPOSAL	LT MONITOR	CAMPGROUND	SWIMMING	SEPTAGE
1. SALARIES & WAGES	292,555	167,094	1,197	3,774	3,930	2,073
2. FRINGE BENEFITS	115,536	40,973	446	1,102	1,308	537
3. CAP EXP FOR EQUIP & FAC	,	ŕ		,	·	
4. CONTRACTUAL (SUBCONTRACTS)						
5. SUPPLIES & MATERIALS	4,600	1,750	25	1,770	1,200	100
6. TRAVEL	18,000	15,000	300	4,000	4,000	300
7. COMMUNICATION	2,500	1,000	50	500	250	25
8. COUNTY/CITY CENTRAL SERVICES						
9. SPACE COSTS SPACE ALLOCATION	12,560	5,025	15	60	57	37
10. ALL OTHERS (ADP & MISC.)	27,100	2,500	125	1,600	50	200
TOTAL PROGRAM EXPENSES	472,852	233,342	2,158	12,806	10,795	3,272
	,		_,		,	-,
1. INDIRECT COST	139,002	70,871	560	1,661	1,784	889
34.06160%						
2. COST ALLOCATION PLAN/OTHER						
COMMUNITY HEALTH SERVICES	4,293					
PREVENTION SERVICES						
IMMUNIZATION DISTRIBUTION						
CSHCS DISTRIBUTION		.== .=.		2 2 4 2		
ENVIRONMENTAL HEALTH		173,151	1,240	3,910	4,073	2,148
ALLOCATION EXPENSE TOTAL INDIRECT COST	143,295	244,022	1,800	5,571	5,857	2 020
UNALLOCATED FUND BALANCE	143,295	244,022	1,000	5,571	5,657	3,038
TOTAL EXPENDITURES	616,147	477,364	3,958	18,377	16,653	6,310
	213,111	,	-,,,,,		,	-,
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND PA	264,000	132,000		12,000	12,000	3,200
2. FEES & COLLECTIONS - 3RD PARTY	, , , , , , ,	,,,,,,,		,	,	-,
3. FED/STATE FUNDING (NON-MDHHS)		12,000	3,450	6,210	4,150	3,000
4. FEDERAL MEDICAID COST BASED RE						
5. FEDERALLY PROVIDED VACCINES						
6. FEDERAL MEDICAID OUTREACH						
7 DECUMPED MATCH LOCAL						
7. REQUIRED MATCH - LOCAL						
8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS						
10. LOCAL - NON ELPHS						
11. OTHER - NON ELPHS						
12. MDHHS NON COMPREHENSIVE						
13. MDHHS COMPREHENSIVE						
14. ELPHS MDHHS HEARING						
15. ELPHS MDHHS VISION						
16. ELPHS MDHHS OTHER	270 569					
17. ELPHS FOOD	279,568					
18. ELPHS PRIVATE/TYPE III WATER 19. ELPHS ON-SITE WASTEWATER TREA		279,833				
19. EEFIIS ON-SITE WAS TEWATER TREA		279,033				
20. MCH FUNDING						
21. LOCAL - COUNTY APPROPRATIONS	9,041	39,532	508	167	503	110
22. INKIND MATCH						
23. MDHHS FIXED UNIT RATE						
MDHHS LOCAL COMM STABLIZATION	63,538					
COURSE OF FUNDS ADDITION	010.11	100.00		10.0==	10.555	0.015
SOURCE OF FUNDS ABOVE	616,147	463,364	3,958	18,377	16,653	6,310
USE OF DESIGNATED FUND BALANCE	0	14,000	-	-	-	(0)
UNAPPROPRIATED FUND BALANCE	-	14,000				
TOTAL SOURCE OF FUNDS IN BUDGET	616 147	477.364	2.050	18,377	16,653	6,310
TOTAL SOURCE OF FUNDS IN BUDGET	616,147	477,364	3,958	18,377	10,053	0,310

10/1/2024 - 9/30/2025						
	719	720	721	722	723	724
	EGLE	EH	DRINKING	PFAS	PFAS	PFAS
PROGRAM EXPENSES	BODY ART	COMPLAINTS	WATER SUPPLY	Lear Siegler	White Pigeon	Westside Landfil
1. SALARIES & WAGES	2,073	2,073	159,433	1,084	1,084	1,084
2. FRINGE BENEFITS	537	537	38,633	159	159	159
3. CAP EXP FOR EQUIP & FAC						
4. CONTRACTUAL (SUBCONTRACTS) 5. SUPPLIES & MATERIALS	100	100	1,750		_	_
6. TRAVEL	400	250	12,000	25	25	-
7. COMMUNICATION	25	25	1,000	-	-	-
8. COUNTY/CITY CENTRAL SERVICES						
9. SPACE COSTS						
SPACE ALLOCATION	36	37	5,518	9	9	9
10. ALL OTHERS (ADP & MISC.)	50	50	2,000	1,300	8,000	6,000
TOTAL PROGRAM EXPENSES	3,222	3,072	220,335	2,577	9,277	7,252
1. INDIRECT COST	889	889	67,465	423	423	423
34.06160%			21,122			
2. COST ALLOCATION PLAN/OTHER						
COMMUNITY HEALTH SERVICES						
PREVENTION SERVICES						
IMMUNIZATION DISTRIBUTION						
CSHCS DISTRIBUTION	2 140	2 140	165 010			
ENVIRONMENTAL HEALTH ALLOCATION EXPENSE	2,148	2,148	165,212			
TOTAL INDIRECT COST	3,038	3,038	232,677	423	423	423
UNALLOCATED FUND BALANCE	2,222	5,000				
TOTAL EXPENDITURES	6,259	6,110	453,012	3,000	9,700	7,675
SOURCE OF FUNDS						
1. FEES & COLLECTIONS - 1ST & 2ND PA	576		152,000			
2. FEES & COLLECTIONS - 3RD PARTY						
3. FED/STATE FUNDING (NON-MDHHS)						
4. FEDERAL MEDICAID COST BASED RE						
5. FEDERALLY PROVIDED VACCINES						
6. FEDERAL MEDICAID OUTREACH						
7. REQUIRED MATCH - LOCAL						
8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS						
10. LOCAL - NON ELPHS						
11. OTHER - NON ELPHS						
12. MDHHS NON COMPREHENSIVE				1,329	8,042	6,627
13. MDHHS COMPREHENSIVE						
14. ELPHS MDHHS HEARING						T .
15. ELPHS MDHHS VISION						1
16. ELPHS MDHHS OTHER						
17. ELPHS FOOD						
18. ELPHS PRIVATE/TYPE III WATER			275,833			
19. ELPHS ON-SITE WASTEWATER TREA						
20 MCH EUNDING						
20. MCH FUNDING						
21. LOCAL - COUNTY APPROPRATIONS	2,351	6,110	11,179	1,671	1,658	1,048
22. INKIND MATCH	,		, ,	,-	,	,
23. MDHHS FIXED UNIT RATE	3,332					
MDHHS LOCAL COMM STABLIZATION						<u> </u>
SOURCE OF FUNDS ABOVE	6,259	6,110	439.012	3,000	9,700	7,675
COUNCE OF FUNDS ABOVE	(0)	0,110	438,012	3,000	9,700	7,675
USE OF DESIGNATED FUND BALANCE	(0)	-	14,000	<u> </u>		0
UNAPPROPRIATED FUND BALANCE						
TOTAL SOURCE OF FUNDS IN BUDGET	6,259	6,110	453,012	3,000	9,700	7,675

10/1/2024 - 9/30/2025			
	745	3	
	TYPE II	FUND	GRAND
PROGRAM EXPENSES	WATER	BALANCE	TOTAL
1. SALARIES & WAGES	103,728		3,793,997
2. FRINGE BENEFITS	35,052		1,906,806
3. CAP EXP FOR EQUIP & FAC	00,002		78,000
4. CONTRACTUAL (SUBCONTRACTS)			916,483
5. SUPPLIES & MATERIALS	4,400		491,275
6. TRAVEL	7,000		184,028
7. COMMUNICATION	1,500		104,299
8. COUNTY/CITY CENTRAL SERVICES			-
9. SPACE COSTS			286,164
SPACE ALLOCATION	1,962		(0)
10. ALL OTHERS (ADP & MISC.)	19,850		1,735,564
TOTAL PROGRAM EXPENSES	173,492		9,496,616
1. INDIRECT COST	47,271		(1,011)
34.06160%	11,211		- (1,011)
2. COST ALLOCATION PLAN/OTHER			=
COMMUNITY HEALTH SERVICES			(6,538)
PREVENTION SERVICES			=
IMMUNIZATION DISTRIBUTION			-
CSHCS DISTRIBUTION			4,293
ENVIRONMENTAL HEALTH			(6,677)
ALLOCATION EXPENSE	47.074		13,000
TOTAL INDIRECT COST UNALLOCATED FUND BALANCE	47,271	3,247,292	3,066 3,247,292
TOTAL EXPENDITURES	220,763	3,247,292	12,746,972
		5,2,252	12,1 10,012
SOURCE OF FUNDS			
1. FEES & COLLECTIONS - 1ST & 2ND PA			611,866
2. FEES & COLLECTIONS - 3RD PARTY			231,750
			843,616
3. FED/STATE FUNDING (NON-MDHHS)	217,736		1,826,164
4. FEDERAL MEDICAID COST BASED RE	217,736		1,826,164 611,808
FEDERAL MEDICAID COST BASED RE FEDERALLY PROVIDED VACCINES	217,736		1,826,164 611,808 300,000
4. FEDERAL MEDICAID COST BASED RE	217,736		1,826,164 611,808 300,000 35,439
FEDERAL MEDICAID COST BASED RE FEDERALLY PROVIDED VACCINES FEDERAL MEDICAID OUTREACH	217,736		1,826,164 611,808 300,000 35,439 2,773,411
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788
FEDERAL MEDICAID COST BASED RE FEDERALLY PROVIDED VACCINES FEDERAL MEDICAID OUTREACH	217,736		1,826,164 611,808 300,000 35,439 2,773,411
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER 19. ELPHS ON-SITE WASTEWATER TREA	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER	217,736		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER 19. ELPHS ON-SITE WASTEWATER TREA			1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867 99,409
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER 19. ELPHS ON-SITE WASTEWATER TREA 20. MCH FUNDING	3,027		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER 19. ELPHS ON-SITE WASTEWATER TREA 20. MCH FUNDING 21. LOCAL - COUNTY APPROPRATIONS 22. INKIND MATCH			1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867 99,409
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER 19. ELPHS ON-SITE WASTEWATER TREA 20. MCH FUNDING			1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867 99,409
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER 19. ELPHS ON-SITE WASTEWATER TREA 20. MCH FUNDING 21. LOCAL - COUNTY APPROPRATIONS 22. INKIND MATCH			1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867 99,409
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER 19. ELPHS ON-SITE WASTEWATER TREA 20. MCH FUNDING 21. LOCAL - COUNTY APPROPRATIONS 22. INKIND MATCH 23. MDHHS FIXED UNIT RATE			1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867 99,409 741,868
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS FOOD 18. ELPHS PRIVATE/TYPE III WATER 19. ELPHS ON-SITE WASTEWATER TREA 20. MCH FUNDING 21. LOCAL - COUNTY APPROPRATIONS 22. INKIND MATCH 23. MDHHS FIXED UNIT RATE			1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867 99,409 741,868
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS FOOD 18. ELPHS ON-SITE WASTEWATER TREA 20. MCH FUNDING 21. LOCAL - COUNTY APPROPRATIONS 22. INKIND MATCH 23. MDHHS FIXED UNIT RATE MDHHS LOCAL COMM STABLIZATION SOURCE OF FUNDS ABOVE	3,027		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867 99,409 741,868 105,332 213,538
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS FOOD 18. ELPHS ON-SITE WASTEWATER TREA 20. MCH FUNDING 21. LOCAL - COUNTY APPROPRATIONS 22. INKIND MATCH 23. MDHHS FIXED UNIT RATE MDHHS LOCAL COMM STABLIZATION SOURCE OF FUNDS ABOVE	3,027		1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867 99,409 741,868 105,332 213,538 9,189,303 (0) 310,378
4. FEDERAL MEDICAID COST BASED RE 5. FEDERALLY PROVIDED VACCINES 6. FEDERAL MEDICAID OUTREACH 7. REQUIRED MATCH - LOCAL 8. LOCAL - NON ELPHS 9. LOCAL - NON ELPHS 10. LOCAL - NON ELPHS 11. OTHER - NON ELPHS 11. OTHER - NON ELPHS 12. MDHHS NON COMPREHENSIVE 13. MDHHS COMPREHENSIVE 14. ELPHS MDHHS HEARING 15. ELPHS MDHHS VISION 16. ELPHS MDHHS OTHER 17. ELPHS FOOD 18. ELPHS FOOD 18. ELPHS ON-SITE WASTEWATER TREA 20. MCH FUNDING 21. LOCAL - COUNTY APPROPRATIONS 22. INKIND MATCH 23. MDHHS FIXED UNIT RATE MDHHS LOCAL COMM STABLIZATION SOURCE OF FUNDS ABOVE	3,027	3,247,292	1,826,164 611,808 300,000 35,439 2,773,411 53,788 35,902 25,073 72,000 362,586 495,561 617,611 1,689,303 2,306,914 90,100 90,100 540,434 279,568 275,833 279,833 1,555,867 99,409 741,868 105,332 213,538

9,499,680	Allocated for Use
12,746,973	Total Revenues
3,247,292	Unallocated Fund Balance
310,378	Designated Fund Balance
709,099	Other
6,840,932	State/Federal
795,657	Local Approp
843,616	Fees

3,247,292 Unallocated Fund Balance 12,746,972

795,657.00 Agency FY County Approp.

0.40 Under (OVER) County FY

Wage Increase Recommendation

Wage growth at the Branch-Hillsdale-St. Joseph Community Health Agency (BHSJCHA) has been irregular over the last 20 years, which has caused the employees to earn less than people similarly employed. The data to support this was collected in May of 2023 by an independent contractor from Municipal Consulting Services, LLC. The issue was also identified during the strategic planning process, and employee investment was set as strategic priority area #1. Additional funding was awarded in the last fiscal year which allows the agency to increase the wage scale to be more competitive. The Agency is recommending a 5% increase in wages, which will bring the scale near the average salary of similar local health department workers (as of May of 2023).

Due to budget constraints, agency employees did not receive regular adjustments for the increased cost of living between 2010 and 2019. This caused the pay scale to get further behind each year that no increase was provided. Between 2010 and 2019, wages rose little more than 2% while inflation rose 17.7%, leaving the employees with greatly reduced buying power.

Inflati	on Ra	tes											
Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Ave
2024	3.1	3.2	3.5	3.4	3.3	3	2.9	2.5	2.4	2.6			2.99
2023	6.4	6	5	4.9	4	3	3.2	3.7	3.7	3.2	3.1	3.4	4.1
2022	7.5	7.9	8.5	8.3	8.6	9.1	8.5	8.3	8.2	7.7	7.1	6.5	8.0
2021	1.4	1.7	2.6	4.2	5	5.4	5.4	5.3	5.4	6.2	6.8	7	4.7
2020	2.5	2.3	1.5	0.3	0.1	0.6	1	1.3	1.4	1.2	1.2	1.4	1.2
2019	1.6	1.5	1.9	2	1.8	1.6	1.8	1.7	1.7	1.8	2.1	2.3	1.8
2018	2.1	2.2	2.4	2.5	2.8	2.9	2.9	2.7	2.3	2.5	2.2	1.9	2.4
2017	2.5	2.7	2.4	2.2	1.9	1.6	1.7	1.9	2.2	2	2.2	2.1	2.1
2016	1.4	1	0.9	1.1	1	1	0.8	1.1	1.5	1.6	1.7	2.1	1.3
2015	-0.1	0	-0.1	-0.2	0	0.1	0.2	0.2	0	0.2	0.5	0.7	0.1
2014	1.6	1.1	1.5	2	2.1	2.1	2	1.7	1.7	1.7	1.3	0.8	1.6
2013	1.6	2	1.5	1.1	1.4	1.8	2	1.5	1.2	1	1.2	1.5	1.5
2012	2.9	2.9	2.7	2.3	1.7	1.7	1.4	1.7	2	2.2	1.8	1.7	2.1
2011	1.6	2.1	2.7	3.2	3.6	3.6	3.6	3.8	3.9	3.5	3.4	3	3.2
2010	2.6	2.1	2.3	2.2	2	1.1	1.2	1.1	1.1	1.2	1.1	1.5	1.6
	Total Average Inflation since 2012:										38.69		

https://www.usinflationcalculator.com/inflation/current-inflation-rates/

In an effort to realign the scale and identify where compensation should be set, in late 2019 the Agency contracted Municipal Consulting Services to complete a Classification and Compensation Study. The study concluded that all employees should be compensated more, and a new scale was proposed. At that time, the Agency did not have enough funding to fully implement the new scale, but raised wages as much as the budget would allow. Although the Agency was not able to fully implement the scale in 2020, it made investing in employees a priority and has been working the last several years to achieve the target wages set in 2019. The 2019 recommendation was fully achieved by an adjustment to the

scale made in October of 2022; however, that still leaves the employees compensated at a rate below the recommendation adjusted for inflation. Inflation has been high in the last 4 years (see chart above), as also evidenced by the Social Security COLA increases which have totaled 20.3% in the last 4 years (2022, 5.9%; 2023, 8.7%; 2024, 3.2%; 2025, 2.5%).

The Agency went through a Strategic Planning process in early 2022 to set the strategic priorities of the Agency. The planning process was facilitated by a consultant and involved input from all agency staff. During the planning process, strategic priority area #1 was set at employee investment. Among other things, one of the activities under this priority area include presenting a wage equity plan to the Board of Health annually. The Agency also does an annual employee satisfaction survey which included many comments about current wages being low.

The Agency continues to prioritize funding in employee investment, which assists in recruiting and retaining qualified staff. Unfortunately, with the current scale, it is difficult to find qualified staff for higher degreed positions. We bring on young staff with little or no experience and train them, only to lose them to other agencies with a higher wage scale.

The Agency is recommending a 5% increase to the current wage scale. This will bring the Agency pay scale very near the average of employees in similar positions among 15 other local health departments who were surveyed in March of 2023 as part of a Compensation study conducted by Municipal Consulting Services. The Agency recognizes that this increase is above the yearly inflation rate, but the Agency's current scale is still proven to be below the market average, so a larger increase is necessary. It is also important to remember, that the proposed increase will bring us near the average in the recent study, but the data for that study is now 18 months old. In order to attract and retain the best, most qualified staff, the Agency must invest in its workforce by continuing the work to improve the wage scale.

Municipal Consulting Services LLC Comparision of Labor Market Wage Data from May 2023

Position Title	BHSJ PROPOSED	AVERAGE OF ALL
Health Officer	54.87	\$62.45
Administrative and Finance Services Director	45.75	\$50.93
Administrative Assistant	21.4	\$22.07
Information Technology Manager	34.9	\$48.40
Accountant	34.9	\$30.80
Accounts Payable Clerk	24.19	\$23.79
Procurement Specialist/Clerk	18.94	\$24.39
Billing Clerk I	24.19	\$22.48
Clerical Leader	21.4	\$25.07
Generic Clerk	18.94	\$20.93
Payroll and HR Technician	30.88	\$28.16
Emergency Preparedness Coordinator	34.9	\$35.73
CSHCS Representative	18.94	\$22.33
Supervisor for Health Promotion	39.44	\$40.09
Health Educator I	30.88	\$30.11
Vision and Hearing Coordinator	39.44	\$28.01
Vision and Hearing Technician	18.94	\$20.31
Community Health Worker I	21.4	\$22.44
Breastfeeding Peer Counselor	18.94	\$19.34
Care Coordinator	30.88	\$30.82
Director of Clinical Community Health	45.75	\$51.80
Personal Health Supervisor	39.44	\$40.74
Social Worker (BA)	30.88	\$30.65
Nurse RN	34.9	\$33.73
WIC Supervisor	39.44	\$40.52
WIC Clinical Assistant	18.94	\$19.81
Central Scheduler	18.94	\$19.96
Clinical Assistant	18.94	\$19.49
Director of Environmental Health	45.75	\$45.36
Supervisor of Environmental Health	39.44	\$38.10
Environmental Health Administrative Assistant	21.4	\$22.49
Sanitarian II or III (registered)	34.9	\$33.83
Sanitarian I or II (not registered)	30.88	\$29.26
Part-Time Secretary/Clerk	16.76	\$18.35

LHD Participating						
in Survey						
Barry/Eaton DHD						
Berrien County						
Branch-Hillsdale-St. Joseph						
Calhoun County						
Central Michigan DHD						
DHD #10						
Grand Traverse County						
Northwest Michigan						
Ingham County						
Jackson County						
Kalamazoo County						
Kent County						
Mid-Michigan DHD						
Monroe County						
Muskegon County						
Ottawa County						
Van Buren / Cass County DHD						

21	62%
13	38%

2025 PROPOSED Salary Scale

HOURLY/PROFESSIONAL/TECHNICAL

LEVEL	CLASSIFICATION	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7
1	EH ASSISTANT CLERK	\$13.97	\$14.40	\$14.84	\$15.30	\$15.77	\$16.26	\$16.76
2	WIC BF PEER COUNSELOR	\$15.78	\$16.27	\$16.77	\$17.29	\$17.82	\$18.37	\$18.94
2	CSHCS REPRESENTATIVE						\$18.37	
2	ADMIN SUPPORT CLERK	="	•	•	•	•	\$18.37	•
2	VISION/HEARING TECH	•	•	•	•	•	\$18.37	-
2	IMMZ CLERK	\$15.78	\$16.27	\$16.77	\$17.29	\$17.82	\$18.37	\$18.94
2	CLINIC CLERK TECH	\$15.78	\$16.27	\$16.77	\$17.29	\$17.82	\$18.37	\$18.94
3	EH ADMIIN ASSISTANT	\$17.83	\$18.38	\$18.95	\$19.54	\$20.14	\$20.76	\$21.40
3	CLINIC ADMIN ASST	\$17.83	\$18.38	\$18.95	\$19.54	\$20.14	\$20.76	\$21.40
3	AAA PROGRAM SPECIALIST	\$17.83	\$18.38	\$18.95	\$19.54	\$20.14	\$20.76	\$21.40
3	AAA OUTREACH SPECIALIST	\$17.83	\$18.38	\$18.95	\$19.54	\$20.14	\$20.76	\$21.40
3	COMMUNITY HEALTH WORKER	\$17.83	\$18.38	\$18.95	\$19.54	\$20.14	\$20.76	\$21.40
4	AAA VOCA SPECIALIST	\$20.15	\$20.77	\$21 <i>/</i> 11	\$22.08	\$22.76	\$23.46	\$24.19
4	FISCAL SUPPORT SPECIALIST	-		-		-	\$23.46	-
5	OPEN GRADE	\$22.77	\$23.47	\$24.20	\$24.95	\$25.72	\$26.51	\$27.33
6	EH SANITARIAN	\$25.73	\$26.52	\$27.34	\$28.19	\$29.06	\$29.96	\$30.88
6	AAA SW CARE CONSULTANT	\$25.73	\$26.52	\$27.34	\$28.19	\$29.06	\$29.96	\$30.88
6	HEALTH EDUCATOR	\$25.73	\$26.52	\$27.34	\$28.19	\$29.06	\$29.96	\$30.88
6	HR SUPPORT SPECIALIST							
7	SENIOR EH SANITARIAN	\$29.07	\$29.97	\$30.90	\$31.85	\$32.84	\$33.85	\$34.90
7	FINANCE AND IT SUPPORT SPECIALIST	\$29.07	\$29.97	\$30.90	\$31.85	\$32.84	\$33.85	\$34.90
7	COMM HEALTH SERV RN	\$29.07	\$29.97	\$30.90	\$31.85	\$32.84	\$33.85	\$34.90
7	PUBLIC HEALTH RN	\$29.07	\$29.97	\$30.90	\$31.85	\$32.84	\$33.85	\$34.90
7	ACCOUNTANT	\$29.07	\$29.97	\$30.90	\$31.85	\$32.84	\$33.85	\$34.90
7	EMERGENCY PREP COORD	\$29.07	\$29.97	\$30.90	\$31.85	\$32.84	\$33.85	\$34.90
7	IT NETWORK MANAGER	\$29.07	\$29.97	\$30.90	\$31.85	\$32.84	\$33.85	\$34.90
SALA	RIED MANAGERIAL							
LEVEL	CLASSIFICATION	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7
8	CLINIC SUPERVISOR	\$32.85	\$33.87	\$34.92	\$35.99	\$37.11	\$38.25	\$39.44
8	COMM HEALTH SERV SUPERVISOR	\$32.85	\$33.87	\$34.92	\$35.99	\$37.11	\$38.25	\$39.44
8	EH SUPERVISOR	\$32.85	\$33.87	\$34.92	\$35.99	\$37.11	\$38.25	\$39.44
9	ENVIRONMENTAL HEALTH DIR.	\$38.11	\$39.29	\$40.50	\$41.75	\$43.04	\$44.37	\$45.75
9	PREV.HEALTH/DISEASE PREV. DIR.	\$38.11	\$39.29	\$40.50	\$41.75	\$43.04	\$44.37	\$45.75
9	ADMINISTRATIVE SERVICES DIR.	\$38.11	\$39.29	\$40.50	\$41.75	\$43.04	\$44.37	\$45.75
9	AAA DIRECTOR	\$38.11	\$39.29	\$40.50	\$41.75	\$43.04	\$44.37	\$45.75
	Proposed - Effective January 1, 2024							

2024 Salary Scale

HOURLY/PROFESSIONAL/TECHNICAL

LEVEL	CLASSIFICATION	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7
1	EH ASSISTANT CLERK	\$13.30	\$13.72	\$14.14	\$14.58	\$15.03	\$15.49	\$15.97
2	WIC BF PEER COUNSELOR	\$15.03	\$15.50	\$15.98	\$16.47	\$16.98	\$17.51	\$18.05
2	CSHCS REPRESENTATIVE	•	\$15.50	•	•	•	•	
2	ADMIN SUPPORT CLERK	•	\$15.50	•	•	-	-	•
2	VISION/HEARING TECH	\$15.03	\$15.50	\$15.98	\$16.47	\$16.98	\$17.51	\$18.05
2	IMMZ CLERK		\$15.50					\$18.05
2	CLINIC CLERK TECH	\$15.03	\$15.50	\$15.98	\$16.47	\$16.98	\$17.51	\$18.05
3	EH ADMIIN ASSISTANT	\$16.99	\$17.51	\$18.05	\$18.61	\$19.19	\$19.78	\$20.39
3	CLINIC ADMIN ASST	\$16.99	\$17.51	\$18.05	\$18.61	\$19.19	\$19.78	\$20.39
3	AAA PROGRAM SPECIALIST	\$16.99	\$17.51	\$18.05	\$18.61	\$19.19	\$19.78	\$20.39
3	AAA OUTREACH SPECIALIST	\$16.99	\$17.51	\$18.05	\$18.61	\$19.19	\$19.78	\$20.39
3	COMMUNITY HEALTH WORKER	\$16.99	\$17.51	\$18.05	\$18.61	\$19.19	\$19.78	\$20.39
4	AAA VOCA SPECIALIST	\$19.20	\$19.79	\$20.40	\$21.03	\$21.68	\$22.35	\$23.04
4	FISCAL SUPPORT SPECIALIST	\$19.20	\$19.79	\$20.40	\$21.03	\$21.68	\$22.35	\$23.04
5	OPEN GRADE	\$21.69	\$22.36	\$23.05	\$23.77	\$24.50	\$25.26	\$26.04
6	EH SANITARIAN	\$24.51	\$25.27	\$26.05	\$26.86	\$27.69	\$28.54	\$29.42
6	AAA SW CARE CONSULTANT	\$24.51	\$25.27	\$26.05	\$26.86	\$27.69	\$28.54	\$29.42
6	HEALTH EDUCATOR	\$24.51	\$25.27	\$26.05	\$26.86	\$27.69	\$28.54	\$29.42
6	HR SUPPORT SPECIALIST							
7	SENIOR EH SANITARIAN	\$27.70	\$28.56	\$29.44	\$30.35	\$31.29	\$32.25	\$33.25
7	FINANCE AND IT SUPPORT SPECIALIST	\$27.70	\$28.56	\$29.44	\$30.35	\$31.29	\$32.25	\$33.25
7	COMM HEALTH SERV RN	\$27.70	\$28.56	\$29.44	\$30.35	\$31.29	\$32.25	\$33.25
7	PUBLIC HEALTH RN	\$27.70	\$28.56	\$29.44	\$30.35	\$31.29	\$32.25	\$33.25
7	ACCOUNTANT	\$27.70	\$28.56	\$29.44	\$30.35	\$31.29	\$32.25	\$33.25
7	EMERGENCY PREP COORD	\$27.70	\$28.56	\$29.44	\$30.35	\$31.29	\$32.25	\$33.25
7	IT NETWORK MANAGER	\$27.70	\$28.56	\$29.44	\$30.35	\$31.29	\$32.25	\$33.25
SALAI	RIED MANAGERIAL							
LEVEL	CLASSIFICATION	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7
8	CLINIC SUPERVISOR	\$31.30	\$32.27	\$33.27	\$34.29	\$35.35	\$36.44	\$37.57
8	COMM HEALTH SERV SUPERVISOR	\$31.30	\$32.27	\$33.27	\$34.29	\$35.35	\$36.44	\$37.57
8	EH SUPERVISOR	\$31.30	\$32.27	\$33.27	\$34.29	\$35.35	\$36.44	\$37.57
		·	•	·	·			
9	ENVIRONMENTAL HEALTH DIR.		\$37.43					
9	PREV.HEALTH/DISEASE PREV. DIR.		\$37.43					
9	ADMINISTRATIVE SERVICES DIR.	•	\$37.43	•	•	-	-	•
9	AAA DIRECTOR	\$36.31	\$37.43	\$38.59	\$39.78	\$41.01	\$42.28	\$43.58
	Adopted by the Board of Health December 14, 2	2023 - Effecti	ve January	1, 2024				



2025 Board of Health Meetings

Board of Health Meetings are the 4th Thursday at 9 am of each month with the following exceptions: there is no meeting in October, and the November and December meetings are scheduled for the 2nd Thursday of the month. Board Education will begin immediately at the conclusion of the meeting and end by noon.

Date	Time	Location	Board Education
			Scheduled
January 23	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
February 27	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
March 27	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
April 24	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
May 22	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
June 26	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
July 24	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
August 28	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
September 25	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
November 13	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
December 11	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
January 22, 2026	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes

Board of Health Committees

Finance Committee – 3 members, one from each county Program, Policy & Appeals Committee – 3 members, one from each county

Committees are scheduled to meet as follows:

<u>Finance Committee will meet at 9:00 AM on the following days:</u>

January 17, February 14, March 17, April 21, May 19, June 16, July 21, August 18,

September 15, November 3, December 1

Program, Policy, & Appeals Committee will meet at 8:30 AM on the following days: January 15, February 19, March 19, April 16, May 21, June 18, July 16, August 20, September 17, November 5, December 3

BHSJCHA Administration

Health Officer: Rebecca A. Burns, MPH, RS o: 517-933-3040 c: 269-501-2503 Medical Director: Karen Luparello, DO

Director of Administration: Theresa Fisher, BS

Director of Personal Health & Disease Prevention: Heidi Hazel, BSN, RN

Director of Environmental Health: Joe Frazier, REHS
Director of Area Agency on Aging IIIC: Laura Sutter, BS
Proposed Meeting Schedule – Not Yet Approved

Summary of Proposed Changes to the Personnel Policy Manual

The Agency continuously strives to provide a comprehensive set of administrative policies. As part of this process, we routinely review the existing policy document to determine 1) if the policy is still relevant and needed, 2) whether the purpose or goal of the policy is being met, and 3) to determine if changes or clarifications are needed to ensure that staff and supervisors are understanding and administering the policies in the same manor across the entire Agency.

The changes summarized below are a compilation of changes that have been identified through routine business, programmatic audits, discussions with the agency's attorney, or issues that came up that were not clearly addressed in current policy.

- Page 6 Updated the employment discrimination language. This section was flagged in a recent program audit from one of our grant providers as needing additional information and/or language additions/changes. The proposed language was reviewed and approved by the agency's attorney.
- Page 8 clarified the language for probation to clarify that the probationary period is extended for employees who are laid off during their probationary period.
- Page 8 added language to include an evaluation at the end of the probationary period.
- Page 11 added Marijuana to the list of illegal drugs.
- Page 11 added additional language to the sexual misconduct, domestic violence and dating violence in the workplace section. This section was flagged in a recent program audit from one of our grant providers as needing additional information and/or language additions/changes.
- Page 11 clarified that employees must either text or call their supervisor if they are unable to report to work.
- Page 32 Removed section on Life Enrichment Leave
- Page 37 Added excessive absenteeism as a group I offense
- Page 42 Added or designee of the Administrative Services Director to the Whistleblower Policy.
- Page 42-43 updated the Bad Weather notification section to further clarify how notifications are made.
- Page 48 in the Tornado Emergency Plan, removed information that is covered elsewhere
- Page 59 Updated the language for marijuana into the Substance Abuse policy. The agency received questions from staff and potential hires that the policy did not explicitly prohibit marijuana use, which is currently legal in Michigan. The agency's attorney has reviewed these changes. this section and provided the following comments:
- Page 62 Added appendix A

PURPOSE OF THE PERSONNEL POLICY MANUAL

This manual was developed to describe some of the expectations of our employees and to outline the policies, benefits, and procedures available to eligible employees. Employees should familiarize themselves with the contents of the Personnel Policy Manual as soon as possible, for it will answer many questions about employment with Branch-Hillsdale-St. Joseph Community Health Agency.

No personnel policy manual can anticipate every circumstance or question about policy. As time goes on, the need may arise and the Branch-Hillsdale-St. Joseph Community Health Agency Board of Health reserves the right to revise, supplement, or rescind any policy or portion of the manual from time to time as it deems appropriate, in its sole and absolute discretion.

This Personnel Policy Manual supersedes any and all previous personnel policies created separately and collectively by the Branch-Hillsdale-St. Joseph Community Health Agency Board of Health.

This Personnel Policy Manual shall be distributed to appropriate agency personnel at the time of hire. Copies of subsequent updates of this manual shall be provided to appropriate agency personnel as soon as possible after the adoption of such updates.

Board of Health Branch-Hillsdale-St. Joseph Community Health Agency

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SECTION 1: DEVELOPMENT OF PERSONNEL POLICIES

A. COMPOSITION OF THE PERSONNEL POLICY MANUAL COMMITTEE

The committee shall be composed of the Health Officer, a designee of the Health Officer, three (3) voting members and three (3) alternate members. There shall be one (1) member and one (1) alternate member from each of the three counties - Branch, Hillsdale, and St. Joseph. The purpose of the committee is to provide suggestions to the Health Officer regarding personnel policies contained within.

The Health Officer and their designee serve as representatives of Administration and neither will have voting privileges. They are responsible for taking committee recommendations back to the Board of Health for approval.

B. SELECTION OF OFFICE MEMBERS AND ALTERNATES

A request for nominations of members shall be accepted from all staff in December of each calendar year, term beginning January 1st. Elections will be held each year to elect the alternate member for each county. Staff members shall serve for a two-year term for their respective county's office. Employees elected shall serve the first year as the alternate member and the second year as the voting member. There are no term limits and a member finishing their second year could be re-elected as the new alternate. Staff members may only vote for the member in their home office location.

If there is a vacancy of the voting member or alternate member is vacated during the elected term, the current alternate member shall move into the voting member position for the remainder of their term. If there is a vacancy of an alternate member, a special election will take place to replace the member. The newly elected member will serve the remainder of the current year as alternate and then serve the following year as the voting member.

The committee members, voting and alternates, will elect a chair and a secretary during the first meeting of each year. The secretary shall arrange for the minutes of each meeting to be distributed to each committee member. Committee member names shall be posted annually in the mail room of each office.

C. MEETING SCHEDULE AND PROCEDURES OF THE COMMITTEE

The committee shall meet at the beginning of the year to set a schedule of meetings to be held quarterly. The committee shall meet in special meetings when there are significant issues that warrant meeting more frequently. Meetings are presided over by the Chair or in his/her absence, the Health Officer. The Chair will have an agenda prepared for all meetings. All materials and the agenda will be provided to the members at least two (2) days prior to the schedule meeting. The Secretary will prepare minutes of all meetings,

share approved minutes with the staff by sharing them in the "personnel Policy" folder on the shared drive, and document draft policy changes discussed by the committee.

Each office shall have one vote. If both the voting member and alternate member from an office are present, they will be allowed only one vote. In the event of a tie vote, the issue is to be tabled until the next scheduled meeting, at which time if the issue still results in a tie it is considered defeated.

The committee members are responsible for posting the minutes in each office. The announcement of personnel policy committee meetings and the minutes from the meetings will be sent to 'everyone@bhsj.org' through the Agency's employee's email system and in the Personnel Policy folder on the Coldwater shared drive. Each employee shall be responsible for reading the minutes and providing input to a member of the committee.

D. IMPLEMENTATION AND INTERPRETATION OF THE PERSONNEL POLICIES

The Health Officer shall be responsible for the implementation of the approved personnel policies within this manual. The Administrative Services Director shall be available to the employees and management regarding the interpretation of the personnel policies.

SECTION 2: EMPLOYMENT POLICIES, PROCEDURES AND REQUIREMENTS

A. EMPLOYMENT POLICIES

- 1. <u>Employment Relations</u>. The Board of Health believes that the work conditions, wages, and benefits it offers to its employees are competitive with those offered by other employers in this area and in this industry. If employees have concerns about work conditions or compensation, they are strongly encouraged to voice these concerns openly and directly with their immediate supervisors.
- 2. Equal Opportunity Employer. In order to provide equal employment and advancement opportunities to all individuals, employment decisions at the agency will be based on merit, qualifications, and abilities. The agency does not discriminate in employment opportunities or practices on the basis of race, color, religion, gender, national origin, age, disability, or any other characteristic protected by law. Applicants and employees are protected from employment discrimination based on race, color, religion, sex, national origin, age, disability, genetic information, pregnancy, or veteran status, in all aspects of employment, including hiring, promotion, training, compensation, benefits, discipline, and termination, in accordance with all applicable federal, state, and local laws. The agency will make reasonable accommodations for qualified individuals with known disabilities. This policy governs all aspects of employment, including selection,

job assignment, compensation, discipline, termination, and access to benefits and training.

- 3. <u>Job Posting</u>. The agency provides employees an opportunity to indicate their interest in open positions and advancement according to their skills and experience. Job openings will be posted and normally remain open for five (5) workdays. Each job posting will include the dates of the posting period, job title, department, grade level, essential duties and qualifications.
- 4. <u>Immigration Law Compliance</u>. In compliance with the Immigration Reform and Control Act of 1986, each new employee, as a condition of employment, must complete the Employment Eligibility Verification Form I-9 and present documentation establishing identity and eligibility.
- 5. <u>Hiring of Relatives.</u> Employment of more than one member of the family may be permitted, providing each individual possesses the necessary qualifications and competed in the usual manner with other qualified applicants.
- 6. <u>Conflict of Interest</u>. An actual or potential conflict of interest occurs when an employee is in the position to influence a decision that may result in personal gain for that employee or for a relative as a result of the agency's business dealings. If employees have any influence on transactions involving purchases, contracts, or leases, it is imperative that they disclose to their immediate supervisor as soon as possible the existence of any or potential conflict of interest so that safeguards can be established to protect all parties. For the purposes of this policy a relative is any person related by blood or marriage.
- 7. <u>Outside Employment</u>. Employees may hold outside employment as long as such employment does not present a conflict of interest or in any way interfere with the efficient discharge of duties required to satisfactorily function in the position held with the agency.
- 8. <u>Pre-Employment Medical Exam and Drug Test</u>. After an offer has been made to an applicant entering agency employment, the new hire shall undergo a medical examination and drug test at the agency's expense. The offer and assignment to duties is contingent upon satisfactory completion of these exams. Information on employees' medical condition or history will be kept separate from other employee information and will be maintained confidentially.
- 9. <u>Background Check.</u> When an offer has been made to an applicant entering agency employment, the new hire shall undergo an ICHAT background check, a search of the state and national sex offender lists, and a central registry check for anyone working with children or vulnerable adults (as required by contracts and/or grant funding). The offer and assignment to duties is contingent upon satisfactory completion of this background check process. In order to maintain compliance with the boilerplate language in

requirements of the agency's grant contracts, any findings in background checks may be reviewed by the Agency's attorney. Any finding that would cause compliance issues with the contracts will cause the conditional offer of employment to be rescinded. The Agency will conduct annual background checks on all employees.

All employees are required to notify the Administrative Services Director immediately of criminal convictions, pending felony charges, or listing on the CPS Registry. Failure to comply may result in discipline, up to and including dismissal.

- 10. <u>Hire Date.</u> The date an employee was hired. In the event that an employee had been employed and left employment and subsequently rehired, the Hire Date will be the most recent date of hire.
- 11. <u>Anniversary Date</u>. The Anniversary Date is the Hire Date or if an employee moves into a new job classification the Anniversary Date will change to the date that the new job classification becomes effective.
- 12. <u>Continuous Length of Service</u>. Continuous Length of Service is defined as the period of time in which an employee continues in agency employment without interruption subject to the conditions described in other sections of this manual.
- 13. <u>Orientation</u>. The immediate supervisor will provide each new employee an introduction to their co-worker, work environment, job responsibilities, procedures, and policies. All necessary employment forms and paperwork must be completed on the first day of work with the Administration division.
- 14. <u>Probationary Period</u>. All new and rehired employees will be on a twelve-month probationary period following their date of hire or rehire. At any time during the twelve-month probationary period, the agency may terminate employment for any or no reason. If an employee is <u>laid off or</u> granted an approved medical leave during their probation, the probationary period will be extended to ensure the Agency has the full twelve months of time worked to evaluate the employee. -Employees in their probationary period have no bumping rights. Seniority will be calculated by the date of hire in a position.
- 15. Work Schedule. Work schedules may vary throughout the agency. Immediate supervisors will advise employees of their individual work schedules. Staffing needs and operational demands may necessitate variations in starting and ending times, as well as variations in the total hours that may be scheduled each day and week.
- 16. <u>Performance Evaluations</u>. Immediate supervisors and employees are encouraged to discuss job performance and goals on an informal, day-to-day basis. The immediate supervisor shall prepare the formal evaluations at three months, at six-months and at the <u>end of the</u> one-year probationary period and then every subsequent year following the hire or reassignment of employees.

- 17. <u>Residency Requirement</u>. There shall be no residency requirement that employees live within the boundaries of the areas served by the agency.
- 18. <u>Approval for Hiring</u>. Final approval of the hiring of all agency employees shall rest with the Health Officer.
- 19. <u>Removal from Payroll</u>. An employee who is defined as "casual" and does not work in within 6 consecutive payroll periods shall be removed from payroll as a voluntary resignation.
- 20. <u>Reporting of Accidents/Incidents</u>. The employee must report any & all accidents/injuries within 24 hours to the Administrative Services Director.
- 21. <u>Reporting of Neglect/Abuse/Exploitation</u>. Employees must report any and all suspected case/cases of abuse, neglect, and exploitation immediately by calling State of Michigan Centralized Intake at 855-444-3911. Employee must also notify immediate supervisor.
- 22. <u>Identification Badges</u>. All employees are issued an identification badge and are required to wear it during the performance of their job duties. In the event the badge is lost, stolen, or damaged the employee must notify the Administrative Division for a replacement immediately.
- 23. Sign In/Sign Out Policy. All employees shall sign in when they arrive at work and sign out at the time of leaving the building at any time during the day. This is required so we know who is in the building and who isn't in the event of an emergency. Sign out sheets are in the mail room. Each staff member will be responsible for their own time in and out.
- 24. <u>Drivers Licenses and Car Insurance</u>. Every employee must possess a valid driver's license and car insurance—you will be asked to present copies of these to the Administrative Division at hire and upon renewal.

B. PERSONNEL FILE PROCEDURE

- 1. <u>Contents of the Personnel File</u>. The agency maintains a personnel file on each employee. The personnel file includes such information as the employee's job application, resume, performance evaluations, documentation of reassignments and salary increases, and other employment records.
- 2. Review of the Personnel File. Personnel Files are the property of the agency and access to the information they contain is restricted. Generally, only the immediate supervisor, division director, and other agency personnel who have a legitimate reason, as determined by the Health Officer to review the information in a personnel file, are allowed to do so. Employees are entitled to inspect the contents of their personnel files. Employees who wish to inspect their own personnel file should contact the Administrative Services Director. With reasonable advance notice, employees can review

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the content of their personnel files in the presence of the Administrative Services Director.

- 3. <u>Personnel Data Changes</u>. Employees are responsible for promptly notifying the Administrative Division of any changes in personnel data. Changes relating to personal information such as mailing addresses, telephone numbers, individuals to be contacted in the event of an emergency, dependents covered by agency provided insurance, or marital status must be accurate and up to date.
- 4. <u>Verification of Employment Requests.</u> No information will be shared on an employee until verified with that employee. Verification needs to be made before giving any institutions any information on any employees. **No information will be shared until validated by the Administrative Services Director.**

C. PERSONAL CONDUCT REQUIREMENTS

- 1. <u>General Statement of Policy</u>. It is not possible to list all the forms of behavior that are considered unacceptable in the workplace. The agency expects employees to perform their job in a manner that will protect the interests and safety of all employees and the agency. Violation of the following Personal Conduct Requirements may lead to progressive disciplinary action, up to and including termination of employment.
- 2. <u>Personal Appearance</u>. Employees are expected to present a clean and neat appearance and to dress according to the requirements of their position. Employees who appear for work inappropriately dressed will be sent home and directed to return to work in proper attire. Under such circumstances, employees will not be compensated for the time away from work.
- 3. Agency Phone, Cell Phone, E-mail and Fax Usage. Employees should practice discretion when making personal phone calls and sending e-mail or faxes. Employees shall be required to reimburse the agency for any charges resulting from their personal use of the telephone, fax machine, or copier. Any employee, who has misplaced, lost, or damaged agency property must report such to their supervisor or the Administrative Services Director as soon as possible. The employee may be asked to reimburse the agency for the replacement/repair of said item or items if the loss or damage was a result of negligence by the employee.
- 4. <u>Smoking Policy</u>. In keeping with the agency's intent to provide a safe and healthful workplace, smoking or the use of E-cigarettes is prohibited in any agency facility or within 50 feet of the building.
- 5. <u>Breaks and Lunch Periods</u>. Employees will be granted two (2) paid fifteen-minute breaks during the full workday. Employees will have a ½ hour unpaid lunch period for each full workday. The timing of the breaks and lunch periods will be at the discretion of the department head and in compliance with labor law. It is the supervisor's responsibility to have staff coverage during all service hours, allowing for uninterrupted breaks and lunches.

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- 6. <u>Drugs and Alcohol in the Workplace</u>. It is the agency's <u>desire intent</u> to provide a drugfree, safe and healthful workplace. Employees may not use, possess, distribute, sell, or be under the influence of illegal drugs, <u>marijuana</u>, or alcohol while on agency premises or while conducting agency business-related activities off agency premises. Please refer to the Agency's Substance Abuse Policy in Section 12 of this document.
- 7. <u>Harassment in the Workplace</u>. The agency is committed to providing a workplace that is free of discrimination and unlawful verbal and physical harassment. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal, non-verbal, or physical conduct of a sexual nature. All allegations of harassment should be reported, in writing, to the Administrative Services Director's office as soon as possible. In the event the Administrative Services Director is the alleged harasser, the allegations of harassment should be reported, in writing, to the Health Officer.
- 8. Sexual Misconduct, Domestic Violence and Dating Violence in the Workplace. The agency is committed to providing a workplace that is free of discrimination, unlawful verbal and physical sexual misconduct, domestic violence and dating violence. All allegations of sexual misconduct, domestic violence and dating violence that occurs in the workplace or by an agency employee should be reported, in writing, to the Administrative Services Director's office as soon as possible. In the event the Administrative Services Director is the alleged harasser, the allegations of harassment should be reported, in writing, to the Health Officer.

Employees, volunteers, consultants, or contractors who are victims will be offered available workplace supports and community resources.

- 9. Attendance and Punctuality at Work. To maintain a safe and productive work environment, the agency expects employees to be reliable and punctual in reporting for scheduled work. Absenteeism and tardiness place a burden on other employees and on the agency. When employees cannot avoid being late to work or unable to work as scheduled, they must notify their immediate supervisor via call or text as soon as possible in advance of anticipated tardiness or absence.
- 10. <u>Solicitation</u>. In an effort to ensure a productive and harmonious work environment, persons not employed by the agency may not solicit or distribute literature or products in the workplace at any time for any purpose without the permission of the Health Officer. Employees may not solicit or distribute literature or products concerning outside event and organizations during working time without the permission of the Health Officer.

- 11. <u>Contributions</u>. Contributions by employees to community organization fund drives shall be entirely voluntary. Agency management personnel or Board of Health shall at no time estimate or determine what amount such contributions shall be.
- 12. <u>Use of Agency Equipment</u>. Equipment essential in accomplishing job duties is expensive and may be difficult to replace. When using agency property, employees are expected to exercise care, and follow operating and safety standards and guidelines. Employees shall not engage in the improper, careless, negligent, destructive, or unsafe use or operation of agency equipment. In the event that any Agency owned or leased equipment is misplaced, stolen, lost, or damaged you must report it to the Administrative Services Director immediately. Employees may be asked to reimburse the Agency for the repair/replacement of said item or items if it is deemed the employee was careless and negligent. For legal liability reasons, employees are not to transport non-employees during work time unless special authorization is given.
- 13. <u>Political Activity</u>. Employees are subject to the rights and limitations of the Hatch Act.
- 14. <u>Gifts and Favors</u>. Employees or their immediate family shall not be permitted to accept loans, gifts of money or goods, services or other preferred arrangements for personal benefit under any circumstances directly or indirectly involving possible influence or appearance of influence upon the manner in which they perform work, make decisions to otherwise discharge their duties as an employee.
- 15. <u>Confidentiality of Information</u>. The agency shall be in compliance with the Health Insurance Portability and Accountability Act (HIPAA). Protected information contained in reports, records or communications of the agency shall be considered confidential. Unauthorized disclosure of such information by staff members shall be considered sufficient grounds for dismissal.
- 16. <u>Dating Supervisors</u>. Supervisory staff are strictly forbidden from dating staff they directly supervise. This includes consensual romantic or sexual relationships. Non-consensual relationships constitute sexual harassment and should be reported immediately so appropriate remedial action may occur.

D. EMPLOYEE CLASSIFICATIONS

- 1. <u>Full Time</u>. An employee who is regularly scheduled to work at least 37.5 hours per workweek.
- 2. <u>Minimum Full Time</u>. An employee who is regularly scheduled to work less than 37.5 hour per workweek but a minimum of 30 hours per workweek.

- 3. <u>Part Time</u>. An employee who is regularly scheduled to work at least 20 hours per workweek but less than 25 hours per workweek.
- 4. Casual. An employee who works irregular hours.
- 5. <u>Contractual Employees</u>. An individual performing a service, job or duty as outlined in the terms of a contract are not subject to the Agency's travel reimbursement, pay schedule, vacation or sick time schedule or other benefits unless stated in their contract, but are subject to portions of the Personnel Policy that relate to personal conduct.
- 6. Seasonal Employees. An employee that has been hired to work in a specific program which is suspended each year and the program is scheduled to begin again within 12 months. Employee on seasonal layoff will not earn vacation, sick time, or cash-in-lieu while on layoff. The employee while on seasonal layoff will not be covered by the Health Insurance Policy offered by the Agency and will be transferred to COBRA. The Agency will not issue payments for any benefits which come due while the employee is on seasonal layoff. Such benefits include cash-in-lieu or longevity payments. Any longevity payments normally paid or the cash-in-lieu benefit earned by the employee prior to being placed on seasonal payoff will be paid once the employee returns to work or at the end of our current fiscal year or if the employment is terminated during the seasonal layoff period.

E. EMPLOYEE PROMOTION OR RECLASSIFICATION

The rate of pay, for employees who have been promoted to a higher-level position, will be adjusted to the minimum rate of pay of the higher-level, or to that salary step on the higher-level which is at least a 3% increase above their current rate of pay, whichever is higher.

The rate of pay, for employees who have been reclassified to a position in a lower level, will be paid at their current level or adjusted to their salary step rate of pay, whichever is lower.

The health officer shall authorize all reclassifications.

F. EMPLOYEE TRANSFER

The rate of pay, for employees who have transferred to a position in the same classification, the rate of pay shall be determined by the Health Officer and the division Director based on employee knowledge and training needed.

G. WORK RELATED TRAVEL

Employees who use their own personal vehicles for agency business will be reimbursed at the rate established by the Board of Health. The Board of Health set travel reimbursement at the standard mileage rate as set by the IRS each year. However, if the Health Officer determines that there are budgetary concerns of the agency, any increase in the agency's Travel Reimbursement must be postponed until the budgetary concerns have been addressed.

- 1. Agency Travel Policy. Travel expense reimbursement is based upon the following:
 - Every employee is assigned a home base office
 - Any employee or contractual employee of this Agency who drives a vehicle
 for business related activities or receives mileage reimbursement from this
 Agency must possess at all times, a valid driver's license that does not restrict
 their driving for Agency related business.
 - Within the health district, employees are paid mileage from their home base to
 the place of work assignment and back to their home base. If an employee
 leaves from their residence to a work assignment other than their home base,
 the mileage is paid from their residence if the distance is less than from their
 home base.
 - Employees who request to work at an agency office that is not their home base shall not be reimbursed for travel time and mileage from the home base to the office where they have chosen to work.
 - Employees assigned by their immediate supervisor to job responsibilities at an agency office that is not their home base shall be reimbursed for mileage.
 - Meal expenses incurred within a work day are reimbursed only if they are preapproved by an immediate supervisor. Supervisors shall use discretion approving meal expenses for offsite training, hosting visiting officials, etc.

Breakfast \$10.00
 Lunch \$15.00
 Dinner \$20.00

- Reimbursement for travel outside the health district must be pre-approved by the division director.
- Travel time that occurs outside of assigned business hours will be reimbursed in accordance with the adjusted time policy.
- Reimbursement for training and related expenses (tuition, meals, etc.) must be
 pre-approved by the division director. To begin the pre-approval process,
 employees shall submit an agency Training form, detailing the anticipated
 training expenses, to their supervisors.
- Travel mileage between offices shall be calculated as follows:
 - o Coldwater to Hillsdale, 25 miles
 - o Coldwater to Three Rivers, 40 miles
 - o Coldwater to Sturgis, 26 miles

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o Three Rivers to Sturgis, 23 miles

H. STAFF DEVELOPMENT

The Board of Health encourages employees to develop professionally through training and continuing education. Subject to management approval and agency budgetary constraints, employees will be assisted to attend identified training and education events. Attendance at approved conferences, training, or exams shall be treated as a special work assignment. The agency will require an employee to sign a payback agreement to protect the agency from a premature departure of the employee once high-investment specialty training is concluded.

- 1. <u>Staff Development Procedure.</u> Pursuant to Section 2, Part H of the Branch-Hillsdale-St. Joseph Community Health Agency's Personnel Policies the following procedure has been developed and approved for implementation regarding employee requested training.
 - All regular full-time, minimum full-time, and regular part-time employees are eligible to apply in writing for staff development assistance.
 - Applications for staff development assistance shall be endorsed by the appropriate division director, then reviewed and approved by the health officer for being in the "best interest of the agency".
 - Approved applicants must maintain employment throughout the training period.
 - Approved applicants are eligible for reimbursement of courses taken, not to exceed \$3,000 in four consecutive quarters, three consecutive trimesters, or two consecutive semesters.
 - Pre-approval of expenses must be obtained prior to the beginning of the school term.
 - Covered course expenses are tuition and books.
 - All courses must be through an accredited institution.
 - All courses must be part of an educational program that relates to the employee's current position or a future position with the agency.
 - An employee may request reimbursement for the course or training by submitting a copy of the receipt showing that the fee had been paid by the employee along with the following:
 - ✓ An employee must obtain a grade of "C" or better at the undergraduate level and "B" or better at the graduate level.
 - ✓ Upon the completion of the course(s) and the posting of grades the employee must present the grades to the health officer.
 - Employees who leave before one year's time after the last staff development reimbursement payment must reimburse the agency a pro-rate share of that

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last payment. This requirement may be waived by the health officer upon appeal.

SECTION 3: COMPENSATION POLICIES

A. MONETARY COMPENSATION

- 1. <u>Rate Determination</u>. The Board of Health shall approve an employee salary scale that seeks to assure that covered salaries are externally competitive and are internally comparable in terms of job difficulty and responsibility. A copy of the approved salary scale shall be available in each office.
- 2. <u>Starting Wage</u>. A newly hired employee will start at the minimum of the approved salary range for the position for which they were hired. The Health Officer may approve that an employee be started above the starting wage but not at a wage exceeding the maximum of the salary range. The Health Officer shall seek approval from the Board of Health of any new hire that is started above step two on the employee salary scale.
- 3. <u>Credit Transfer</u>. A division director may recommend to the Health Officer that an employee transferring from a full time or minimum full-time position to another full-time position or minimum full-time position at the same salary range be credited with their prior service for salary.

B. PAY PERIODS

- 1. <u>Schedule</u>. All employees are paid on two-week cycles beginning on Saturday at 0:01 a.m. and ending on Friday at midnight. Payday is on the Friday one week following the close of the pay period. If the regular payday falls on a federal banking holiday, employees can receive their paychecks the last day of work prior to the federal banking holiday.
- 2. Payroll Reporting Responsibility. All employees are responsible for submitting a completed time sheet to their immediate supervisor for approval and processing no later than 9 a.m. of the first work day following the end of the payroll period. The immediate supervisors are responsible for seeing that all submitted and approved time sheets are electronically processed to the agency accounting office no later than 10 a.m. of the first work day following the end of the payroll period.

C. ADDITIONAL TIME POLICY

The additional time policy applies to staff that are required to work on Saturday, Sunday or in excess of normal business hours or on Agency observed Holiday to conduct Agency work at scheduled venues. Staff will receive a minimum of two (2) hours for reporting on the weekend and if the time worked exceeds two (2) hours they will receive an additional ½ hour for each ½ hour worked. The agency recognizes two types of additional time; adjusted-time and overtime.

1. Adjusted Time Schedule

Policy: Full time staff members are limited to a 75 hour per pay period work schedule. Minimum full-time staff members are limited to a 60 hour per pay period work schedule. Part-time staff members are limited to less than 60 hours per pay period work schedule, as specified by their supervisor.

For most staff, their work schedule coincides with the Agency's regular work hours: 7.5 hours per day, Monday through Friday. (Note: While normal business hours are 8 a.m. to 4 p.m., clinic staff, working a late clinic which starts later than 8 a.m. and ends after 4 p.m., should consider a late clinic normal business hours).

Certain positions within the agency (i.e., communicable disease nurse, health educator, sanitarian, outreach worker, etc.) may have work assignments as part of their job duties/responsibilities which require work that can only be done outside of the Agency's normal work schedule. Due to these requirements, the work schedule for these employees can be adjusted, with prior written approval from their division's director, to accommodate these specific duties and responsibilities. (During the affected pay period, the employee will work to accommodate any overages in hours on one day by taking time off on one or more subsequent days. Days selected to adjust for time overages shall be low volume work days or days with limited work commitments.)

Staff members are instructed that, without prior written authorization of the health officer and their director, they are not allowed to work more than their budgeted hours as identified on their Payroll Status Wage Form and are not eligible for overtime payments.

Procedure:

- A. Employees who have work commitments which fall outside of the Agency's regular work hours of Monday through Friday will submit an adjusted time schedule form to their director for the pay period prior to the time being adjusted.
- B. The form will indicate the Employee's name, Employee Number, and the pay period being adjusted.
- C. Employees will identify the number of hours they are working each day, and include the start and end times for each day.

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- D. Employees will identify the reason for the adjustment for those days where they are working outside their normal 7.5 hours per day.
- E. Employees will document that for those days in which they are working more than 7.5 hours, they have made an appropriate adjustment on a subsequent day. Employees will do their best to work with their directors to assure that these adjustments are not made on days which will result in unnecessary work assignment shifts or undue hardship for their co-workers or to the Agency. Scheduled adjustments to offset time in excess of a 7.5-hour day should occur on days that are low volume or with limited commitments.
- F. Employees will certify that they will not deviate from the schedule or work in excess to the schedule by signature without prior notification and approval. In addition, they will also certify they will not work in excess of budgeted hours without written approval of their director and the health officer. An employee cannot use paid time off to exceed their budgeted hours.
- G. Once received, the director will provide written approval in a timely manner, but no later than 24 hours prior to the start of the adjustment.
- H. Written requests and approvals can be submitted in paper form, fax or electronically, as the director prefers.
- I. The director will keep documentation of adjusted work schedules as required by document retention policies.
- J. Failure to submit adjusted work schedule forms and to comply with the adjusted policy and procedures will result in progressive disciplinary action.
- 2. Compensation for Overtime. Hourly/Professional/Technical When the Agency's budget permits, or as otherwise required by law. Staff that work in excess of eighty (40) hours in a single week may be compensated at one and one-half their regular rate of pay for the time in excess of 40 hours. Staff may only work in excess of their budgeted schedule with prior division Director and Health Officer written approval. Paid time off is not considered as time-worked toward the calculation for overtime. Employees will only be compensated at time and a half only if they actually worked more than 40 hours in a week.

D. LONGEVITY COMPENSATION

1. <u>Purpose and Eligibility</u>. Longevity Compensation is granted to regular employees based upon their consecutive years of service. Casual employees are not granted

longevity compensation.

2. <u>Amount Granted</u>. The amount of longevity compensation granted to an eligible employee varies with the number of consecutive years of service from their anniversary date as shown in the following schedule:

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5-9 Years of Service = $150
10-14 Years of Service = $300
15-19 Years of Service = $450
20 Years Plus of Service = $600
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3. <u>Payment Schedule</u>. Longevity compensation payments are paid out to eligible employees on the first payday following the employee's anniversary date. Seasonal employees receive longevity as outlined under the seasonal employee definition.

E. JURY SERVICE

- Purpose and Eligibility. Jury Service Compensation is available to eligible
 employees to encourage employees to fulfill their civic responsibility by serving jury
 duty when required. If an employee of the Branch-Hillsdale-St. Joseph Community
 Health Agency has been called to serve, notification to the employee's immediate
 supervisor and the Administrative Services Director is required for jury service
 compensation.
- 2. <u>Amount Compensated</u>. Employees will be compensated at their normal rate of pay, provided they surrender all compensation received for hours served from other sources associated with their jury duty services.
- 3. <u>Giving Notice</u>. Employees must give reasonable advance notice to their immediate supervisor and the Administrative Services Director of their summons to serve as a possible juror. Employees must also give periodic updates in respect to anticipated jury service completion time.
- 4. <u>Maintenance of Benefits</u>. All paid leave benefits: vacation leave, sick leave, and holidays will continue to accrue during jury service. All insurance plans the employee participated in prior to the jury service will continue during the jury service.

F. 457 DEFERRED COMPENSATION ACCOUNTS

The agency offers two "457" or deferred compensation plans that allow employees to put pre-tax or post-tax dollars away for future retirement needs. All employees are eligible for

benefits that are subject to state and federal regulations. Employee participation is voluntary.

G. MERS RETIREMENT PROGRAM

The agency provides a compulsory retirement plan through the Municipal Employees Retirement System (MERS) for its employees classified as full time and minimum full time. In 2015, the Agency's MERS plan changed from defined benefit to defined contribution. Eligible employees contribute 3% of their gross wages to MERS. The agency contributes an amount determined by MERS as the employer match contribution for those employees under the defined benefit plan. The agency contributes 5% of an employee's gross wages to MERS for those employees on the defined contribution plan. A 55/25 waiver for all participating employees is in effect.

H. HEALTH CARE SAVINGS PLAN (MERS)

A post-employment Health Care Savings Program (HCSP) is an employer-sponsored program that allows employees to save money by getting reimbursed for medical expenses and or health insurance premiums after termination of service from their employer. All contributions made to the program are tax free, will accumulate tax free, and since payouts are used for reimbursing medical expenses they will remain tax free. The Health Care Savings Plan was suspended effective January 1, 2018.

I. BASIC FLEX

The Agency offers staff the opportunity to transfer a portion of their gross pay to a flexible spending plan. The employee determines a dollar amount to be set aside in a special account that can be used to pay for qualifying expenses as they occur. Only full-time and minimum full-time employees qualify to use Basic Flex. See the Accounting department for additional detail regarding this plan.

IRS regulations state that if an employee or an employee's spouse is enrolled in a General Purpose Flex plan, the employee would be disqualified from establishing a Health Savings Account (HSA)

J. AFLAC

The Agency offers AFLAC as part of a flexible spending plan.

K. REIMBURSEMENT FROM SOURCES OTHER THAN THE AGENCY

In the case where some other organization reimburses an employee for job-related expenses, employees shall be allowed reimbursement from one source only for job-related expenses. If reimbursement from a non-agency source is sufficient to cover expenses incurred by an employee, the employee shall submit an expense voucher to the agency, and the reimbursement from the non-agency source shall be turned into the agency.

SECTION 4: INSURANCE BENEFITS

A. HEALTH INSURANCE

- 1. <u>Purpose and Eligibility</u>. The agency provides access to health (medical, dental, and vision) insurance for eligible employees and their families. Full time and minimum full-time employees and their dependents until age 26 are eligible for access to health insurance coverage under the agency's plan. Part time and casual employees are not eligible for access to health insurance coverage through the agency's plan.
- 2. <u>Start of Coverage</u>. Application for health insurance coverage must be made with the Administrative Division upon hiring. Coverage for eligible employees should become effective the first day of employment.
- 3. <u>Cash-in-Lieu of Health Insurance</u>. Those employees that meet the following eligibility requirements:
 - are full time or minimum full time as outlined in (1.) above, and
 - provide proof of health insurance from another provider on an annual basis to the Agency,

Eligible employees may elect to receive a cash-in-lieu payment. This payment is made after the conclusion of each fiscal quarter. An eligible employee as defined above, may elect to take the dental and vision plan and receive a cash-in-lieu payment that is reduced.

- 4. Insurance Benefit During an Unpaid Leave.
 - a) FMLA qualifying event: Employees on an unpaid leave who are eligible for FMLA are charged their regular cost of the health care plan premium during the qualifying FMLA period. A bi-weekly invoice will be provided and employees have a 30-day grace period in which to remit payment. If payment is not received, the insurance will be cancelled.
 - b) Non-qualifying FMLA leave: If an employee is taking unpaid leave, the employee is responsible for the entire cost of the health care plan premium. This rate will be figured on a daily basis of the monthly premium. Contact the Administration Division regarding what the daily charge would be based on the health care plan selected. A bi-weekly invoice will be provided and employees have a 30-day grace period in which to remit payment. If payment is not received, the insurance will be cancelled.

B. LIFE INSURANCE

- 1. <u>Purpose and Eligibility</u>. The Agency provides term life insurance in the amount of \$15,000 for eligible employees. Full time and minimum full-time employees are eligible for life insurance coverage. Part time and casual employees are not eligible for life insurance. Group life insurance coverage will decrease to \$11,000.00 on the first day of the month after an employee's 65th birthday and further shall decrease to \$8,000.00 on the first day of the month after an employee's 70th birthday.
- 2. <u>Accidental Death and Dismemberment Coverage</u>. As part of the agency's life insurance plan, each full time and minimum full-time employee is also covered up to \$15,000 for accidental death and dismemberment. Employees who are on layoff may purchase continuation life insurance coverage.

C. SHORT TERM DISABILITY INSURANCE

- 1. <u>Purpose and Eligibility</u>. The agency provides short-term (up to twenty-six weeks) disability insurance for eligible employees who are unable to work because of a qualifying disability due to injury or illness. Full time and minimum full-time employees are eligible under the agency's short-term disability plan. Part-time and casual employees are not eligible for short-term disability insurance.
- 2. Scope of the Plan. Eligible employees are provided with disability insurance that becomes effective 30 days after the disability and pays 70% of an employee's weekly earnings up \$750.00 during the eligibility period.
- 3. <u>Restrictions</u>. Eligible employees may not collect disability payments in addition to accrued leave time. Only one source of payment either from disability insurance payments or accrued leave time can be collected during any one-time period. Employees who are on layoff are not covered by the short-term disability insurance.
- 4. <u>Relationship to Worker's Compensation</u>. Disabilities covered by worker's compensation are excluded from the agency's short-term disability plan coverage.
- 5. Medical Insurance. The employee is responsible for their portion of the bi-weekly payment of the health care plan they have selected while on short term disability. Invoices will be generated and sent out bi-weekly. Employees are given a 30-day grace period to send in the payment. If payment is not received, the agency will give notice that the policy will be cancelled. If the employee does not qualify for FMLA protection, or FMLA protection has expired, the employee is responsible for paying 100% of the premium for their medical insurance.

D. UNEMPLOYMENT INSURANCE

The agency participates in the state/federal unemployment insurance program. All employees are eligible for benefits that are subject to state and federal regulations.

E. WORKER'S COMPENSATION

The agency provides a comprehensive worker's compensation program that covers employee injuries or illnesses sustained in the course of employment that requires medical, surgical, or hospital treatment. All employees are eligible for benefits that are subject to applicable legal requirements. All work-related injuries or illnesses are to be promptly reported within 24 hours to the Administrative Services Director.

F. PROFESSIONAL LIABILITY INSURANCE

The agency provides liability insurance coverage for all employees engaged in the day-to-day operations of the agency. The agency shall include surety bond coverage.

G. SOCIAL SECURITY

The agency participates in the Federal Social Security Plan. All employees shall supply the payroll department with the necessary information for reporting.

H. COBRA REQUIREMENT

- 1. <u>Purpose and Eligibility</u>. The federal Consolidated Omnibus Budget Reconciliation Act (COBRA) gives regular full-time employees and minimum full-time employees (who have participated in the health insurance plan) the opportunity to continue health insurance coverage when a "qualifying event" would normally result in the loss of health insurance eligibility.
- 2. Qualifying Event Defined. Under COBRA, qualifying event is defined as resignation, termination of employment, or death of an employee; reduction of employee's work hours or a leave of absence; an employee's divorce or legal separation; and a dependent child no longer meeting eligibility requirements.
- 3. <u>Payment of Costs</u>. Under COBRA, the employee or beneficiary pays the full cost of coverage at the agency's health insurance premium rates plus an administration fee.

SECTION 5: EMPLOYEE LEAVE POLICIES

A. VACATION LEAVE

- 1. <u>Purpose & Eligibility</u>. Vacation Leave with pay is available to eligible employees. Full time employees are eligible for vacation leave and minimum full-time employees are eligible for vacation leave on a pro-rata basis. Part time and casual employees do not accrue vacation leave.
- 2. <u>Amount Accrued</u>. The amount of vacation leave employees accrue each year varies with the length of consecutive years of employment. The following accrual schedule assumes a thirty-seven and one-half hour workweek:
 - First 5 years of service = Sixteen (16) days or 4.61 hours per pay period
 - o After 5 years of service = Twenty-Two (22) days or 6.34 hours per pay period

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o After 10 years of service = Twenty-Eight (28) days or 8.07 hours per pay period

The following accrual schedule assumes a thirty-hour workweek:

- o First 5 years of service = 3.68 hours per pay period
- o After 5 years of service = 5.06 hours per pay period
- o After 10 years of service = 6.456 hours per pay period
- 3. <u>Start of Accrual</u>. Employees begin to accrue vacation leave from the date of employment. Earned vacation leave is available for use on the 61st day of employment.
- 4. <u>Vacation Leave and Leaves without Pay</u>. Employees who are on a leave without pay do not accrue any additional vacation leave until their return to service.
- 5. <u>Requesting a Vacation Leave</u>. Employees must request advanced approval from their immediate supervisor to utilize accrued vacation leave. Requests will be reviewed based on a number of factors, including department operational needs and staffing requirements.
- 6. <u>Rate of Payout</u>. Vacation leave will be paid out at the employee's pay rate at the time of vacation leave.
- 7. <u>Maximum Accrual</u>. Employee may accrue vacation leave up to twice the maximum annual accrual allowance schedule. Once an employee has accrued the maximum, no additional vacation leave will be accrued until the employee has used vacation leave to reduce their total below the maximum.
 - a. The following accrual maximum for employees who are full-time:
 - First 5 years of service = 240.00 hours maximum
 - After 5 years of service = 330.00 hours maximum
 - After 10 years of service = 420.00 hours maximum
 - b. The following accrual maximum for employees who are minimum full-time:
 - First 5 years of service = 210 hours maximum
 - After 5 years of service = 270 hours maximum
 - After 10 years of service = 360 hours maximum
- 8. <u>Upon Termination</u>. Upon termination of employment, employees will be paid for all unused accrued vacation leave that has been earned through the last day of work. Payment will be received as a lump sum pay off of the accrued vacation leave. Payment will be withheld if the employee owes the agency money, or will be reduced by the amount of money the employee owes the agency.

B. SICK LEAVE

- 1. <u>Purpose & Eligibility</u>. Sick Leave with pay is available to eligible employees for periods of temporary absences for the following purposes:
 - a) a personal mental or physical illness or injury or to seek treatment for such illness or injury, including a Medical/Dental or preventative care appointment;
 - b) a mental or physical illness or injury or to seek treatment for such illness or injury of a family member or any person that the employee is designated as the primary caregiver in accordance with FMLA. A family member includes any child, stepchild, foster child, parent, spouse, grandparent, grandchild, sibling, or any other individual included in the definition of "family member" under Sec. 2(g) of Paid Medical Leave Act (PMLA), MCL 408.962(g).
 - c) to permit an employee to work less than their regularly scheduled work hours until full recovery following a prolonged illness, injury or surgery;
 - d) for purposes of bereavement for events not covered under the bereavement policy;
 - e) due to the closure of the Health Department, the primary Health Department worksite the employee, or to care for the child of the employee due to the closure of the child's place of care, if such closure is by order of a public official due to a public health emergency;
 - f) if the employee or a family member of the employee is the victim of sexual misconduct, domestic violence, dating violence, or sexual assault, for medical care or counseling, the receipt of victim services, relocation or legal services, or participation in level proceedings related to or resulting from the sexual misconduct, domestic violence, dating violence, or sexual assault;
 - g) for any other purpose not listed above but identified in Section 4 of the PMLA, MCL408.964(1)(a) (b).
- 2. Amount Accrued. Each full-time employee shall accrue sick leave at the rate of 3.46 hours per pay period and each minimum full-time employee shall accrue sick leave at the rate of 2.76 hours per pay period. Each employee that works a minimum of 25 hours per week on average, but less than 30 hours per week and does not otherwise qualify as a minimum full-time employee, shall accrue sick leave at the rate of 2.31 hours per pay period. Part time and casual employees who work less than 25 hours per week on average do not accrue sick leave.
- 3. <u>Start of Accrual</u>. Employees begin to accrue sick leave from the date of employment. Earned sick leave is available for use on the 61st day of employment.
- 4. <u>Sick Leave and Leaves without Pay</u>. Employees who are on a leave without pay do not accrue any additional sick leave until their return to service.
- 5. <u>Notification of Supervisor</u>. An employee requesting to use sick leave must notify their immediate supervisor as soon as possible, preferably- before the scheduled start of their next workday. The immediate supervisor must also be contacted on each additional day of absence.

- 6. Extended Absences. An employee who is off on sick leave three or more consecutive workdays may be required by their immediate supervisor to submit a physician's verification of illness prior to returning to service. Such verification must include the reason for the absence and any job restrictions that may exist prior to returning to work.
- 7. <u>Rate of Payout</u>. Sick leave is paid at the employee's pay rate at the time of illness or injury.
- 8. Maximum Accrual. Employees will be allowed to accrue sick leave up to a maximum of 263 hours. Once an employee has accrued the maximum, no additional sick leave will be accrued until the employee has used sick leave to reduce their total below the maximum. Once a year in December, an employee that has accrued sick leave over 200 hours will be paid for those hours. All payments will be made in the last payroll of the calendar year.
- 9. <u>Limitation on Payment of Accrued Sick Time</u>. Upon resignation of employment, in good standing, employees who have accrued sick leave on the date that they tender their letter of resignation will be paid their accrued and unused hours of their sick leave up to, but not to exceed, a total of 200 hours. Payment may be made in a lump sum. The purpose of this payment is to encourage an employee who intends to resign their employment to continue working through the effective date of their resignation.

In all other cases where the conditions of this policy are not met, an employee forfeits payment for sick time that has accrued, but remains unused, on the date their employment is terminated. Resignation in good standing is defined in Section 7 (G) below.

C. BEREAVEMENT LEAVE

- 1. Purpose & Eligibility. Bereavement Leave with pay is available to eligible employees who need immediate time off to deal with a death in the immediate family. Immediate family shall be defined as spouse, son, daughter, parent, brother, or sister. Full time and minimum full-time employees are eligible for bereavement leave. Part time and casual employees are not eligible for paid bereavement leave.
- 2. <u>Amount Available</u>. Eligible employees may utilize up to three (3) days of bereavement leave per event.
- 3. <u>Requesting Bereavement Leave</u>. Employees should request approval from their immediate supervisor for needed bereavement leave.

- 4. <u>Rate of Payout</u>. Bereavement leave is paid at the employee's rate of pay at the time of the emergency leave.
- 5. <u>Use of Bereavement Leave</u>. Bereavement leave is set up to assist employees with the death of an immediate family member. Bereavement leave cannot be carried from one calendar year to the next.
- 6. <u>Upon Termination</u>. There is no accrued bereavement leave for employees upon termination.

D. FAMILY AND MEDICAL LEAVE

Family and Medical Leave, as specified in federal law (Family and Medical Leave Act of 1993), is available to eligible employees who wish to take time off from work duties to attend to the personal circumstances as outlined in the law. A detailed policy has been approved by the Board of Health

FAMILY AND MEDICAL LEAVE POLICY

In compliance with the Family Medical Leave Act of 1993 and the Branch-Hillsdale-St. Joseph Community Health Agency Personnel Policies:

It is the Branch-Hillsdale-St. Joseph Community Health Agency's policy to grant unpaid family and medical leaves of absence to all full-time and regular part-time employees who worked 1,250 hours or more during the 12 months prior to the request for family and medical leave. You are entitled a maximum of 12 work weeks of leave during any calendar year for one or more of the following purposes:

O To care for your child after birth, adoption or placement of a child in your home for fosters care. Such leave may be taken only in the first year after the birth, adoption or placement of the child.

We shall require medical certification (or rectification on a reasonable basis) of the existence of a "serious health condition" of you or your eligible family member, which certification shall contain the date the health condition commenced, the probable duration of the condition, the appropriate medical facts within the health care providers knowledge regarding the condition. Medical Certification Forms may be obtained from Director of Human Resources.

In certain cases, the following additional information may be required in the Medical Certification:

o If the leave is required because of the serious health condition of an employee's child, parent or spouse, a statement that the eligible

- employee is needed to care for the covered individual and the amount of time necessary for such care.
- o If the leave is needed because of the employee's own serious health condition, a statement that the employee is unable to perform the function of his/her position.
- o For an intermittent leave or a reduced leave schedule for planned medical treatment for the employee, the dates that such treatment is expected to be given and the duration of such treatment; or if not for planned treatment but for rehabilitation, a statement of the medical necessity for and duration of such intermittent leave or reduced leave schedule.
- o For an intermittent leave or leave on a reduced schedule for a child, spouse or parent, a statement that the employee's leave is necessary for the care of such individual or will assist in their recovery, and the expected duration and schedule of the intermittent leave or reduced leave schedule.

We may obtain a second opinion of another physician to verify the health condition certified by your physician.

In the event a conflict exists between the medical opinion of the employee's or covered family member's health care provider and that of the Company in the second opinion examination, a third examination will be required to be performed by a health care provider selected and paid for by the Company. In such instances, the opinion of the third health care provider will be final and binding on the Company and the employee.

Leave may be taken intermittently, when medically necessary, provided that if such leave is recurring, we may require you to transfer temporarily to an available position (at the same pay and benefits) which better accommodates recurring periods of leave.

As part of the leave granted under this policy, you must first use all accrued and unused vacation, sick or earned time off days during a period of family or medical leave.

If you are taking a family and medical leave because of a serious health condition, which makes you unable to perform the functions of your position; you may also be eligible for short- or long-term medical disability benefits. You may not elect to discontinue your family and medical leave at the time you begin receiving medical disability benefits.

All employment benefits that are calculated on an accrual basis, such as vacation, sick time or paid time off, will not accrue during a leave under this policy.

All current group medical insurance benefits will continue during periods leave under this policy, subject to continued payment of your employee premium contribution, if any, which was in effect before your leave.

Participation in pension or retirement plans will continue, subject to the terms and conditions of the plan.

An expected date of return will be determined at the beginning of the leave. If you fail to return within three (3) working days of the expected date of return, you will be considered as having voluntarily resigned employment, without further notice from the employer.

You will be required to report to your supervisor at least every four (4) weeks to report on your status and the possibility that you will be able to return to work at the end of the leave period. You must give the Director of Human Resources five (5) days' notice of the date you expect to return from such leave.

You may not accept nor seek any other employment while on such leave or your employment will be terminated.

When you are released for work by your attending physician, you may be required to make an appointment with our designated physician in order to return to work. The designated physician has the authority to delay or deny your return to work if it is determined that your ability to meet the physical requirements of your position are in question or if it is determined that your condition presents a health hazard to other employees.

- To care for a spouse, child or parent who has a serious health condition.
- To allow you to recover from or receive treatment for a serious health condition which makes you unable to perform the functions of your position.

DEFINITIONS

For purposes of this policy the following definitions apply:

Calendar Year—the employer has elected to use the "rolling year" method for determining the "12-month period" in which the 12 weeks of leave entitlement occurs. The calendar year is measured backward from the date an employee uses any FMLA leave. Each time an employee takes leave under this policy the

remaining leave entitlement would be any balance of the 12 weeks, which has not been used during the immediately preceding 12 months.

Child-includes a biological, adopted, foster child, stepchild, legal ward who is under 18 or older than 18 if incapable of self-care because of a mental or physical disability.

Parent-biological parent or individual legally recognized as a parent to an employee when the employee was a child.

Serious health condition--an illness, injury, impairment, or physical or mental condition that involves inpatient care in a hospital, hospice, or residential medical care facility, or continuing treatment by a health care provider (i.e., a doctor of medicine or osteopathy who is licensed to practice medicine or surgery by the state in which he/she practices).

PROCEDURES FOR REQUESTING AND MAINTAINING LEAVE

If the leave is based upon the expected adoption or placement of a child, or for planned medical treatment of you or your child, spouse or parent, you must provide not less than thirty (30) days' notice of the time your leave is to commence.

If you need to take Family or Medical leave, you must provide us with enough information to determine whether or not you are entitled to such leave as soon as you are able, preferably, before the leave commences.

REINSTATEMENT AFTER LEAVE

Eligible employees taking leave under this policy will be reinstated to their former position, or to an equivalent position, with equivalent benefits and other terms and conditions of employment. However, no employee is entitled under this policy to any right, benefit, or position other than that to which the employee would have been entitled had he/she not taken leave. Thus, for example, if a layoff or some other extenuating circumstances or business condition arises which affects the employee's position, reinstatement may not be possible. Additionally, employees on a leave extension are not guaranteed reinstatement.

The Branch-Hillsdale-St. Joseph Community Health Agency also reserves the right, however, to deny leave reinstatement to "key employees," where such denial is necessary to prevent substantial economic injury to the Agency's operations. Key employees will be notified of the Agency's intention as soon as a determination is made. In the event such notice is given to a key employee already on leave, the employee will be offered the opportunity to terminate his/her leave and immediately return to work. Key employees notified while on leave, who decide not to return to work, will remain on leave. Key employees are

defined as the highest paid 10 percent of the employees employed by the Agency, within 75 miles of the facility at which the employee is employed.

E. EDUCATIONAL LEAVE

- 1. Purpose & Eligibility. Educational Leave without pay is available to eligible employees who wish to take time off from work duties to pursue professional educational goals. The department head determines eligibility for educational leave with concurrence from the Health Officer.
- 2. <u>Amount Received</u>. Eligible employees may request educational leave for a defined period of length. Requests will be evaluated based on a number of factors, including department operational needs and staffing requirements.
- 3. <u>Requesting an Educational Leave</u>. Employees must request an educational leave from their immediate supervisor. Each request for educational leave must be in writing.
- 4. <u>Rate of Payout</u>. Educational leave will be unpaid unless the employee has accrued vacation leave to utilize.
- 5. <u>Suspension of Benefits</u>. All paid leave benefits: vacation leave and sick leave will be suspended during the unpaid educational leave. Health insurance benefits may continue during the unpaid educational leave. If an employee is taking unpaid leave, the employee is responsible for the entire cost of the Health Insurance premium. This rate will be figured on a daily basis of the monthly premium.

F. MILITARY LEAVE

- 1. <u>Purpose & Eligibility.</u> Military Leave without pay is granted to employees who are absent from work because of short term and long-term service in U.S. uniformed services in accordance with the Uniformed Services Employment and Reemployment Rights Act (USERRA) and applicable state laws.
- 2. <u>Amount Received</u>. Employees may request up to ten (10) days per calendar year for use as short-term military leave. Employees may request an indefinite period of time for use as long-term military leave.
- Requesting Military Leave. Employee must give advance notice to their immediate supervisor, unless military necessity prevents such notice or it is otherwise impossible or unreasonable.

- 4. <u>Rate of Payout</u>. Military Leave will be unpaid unless the employee has accrued vacation leave time to utilize.
- 5. <u>Continuation of Benefits.</u> Continuation of health insurance is available as required by USERRA based on the length of the leave and subject to the terms, conditions and limitations of the health insurance plan for which the employee is eligible.
- 6. <u>Termination of Benefits</u>. The military leave and the right to restoration of his/her former position shall automatically terminate if the employee voluntarily remains in the military service beyond the requirement of minimum service.

G. LIFE ENRICHMENT LEAVE

- 1. <u>Purpose & Eligibility</u>. Life Enrichment Leave without pay is available to employees wishing to take time off from work duties to pursue personal enrichment activities. Full time and minimum full-time employees are eligible for sabbatical leave. Part time and casual employees are not eligible for sabbatical leave.
- 2. <u>Amount Received.</u> Eligible employees may request to take up to two months of life enrichment leave each calendar year. Requests will be evaluated based in a number of factors, including department operational needs and staffing requirements.
- 3. Requesting Life Enrichment Leave. Employees must request life enrichment leave from their immediate supervisor. Each request for life enrichment leave shall be in writing.
- 4. Rate of Payout: Life enrichment leave will be unpaid unless the employee has accrued vacation leave time to utilize.
- 5. <u>Suspension of Benefits</u>: All paid leave benefits: vacation and sick leave will be suspended during the unpaid life enrichment leave. Employees will be responsible for the cost of health insurance benefits.

SECTION 6: HOLIDAY POLICY

A. HOLIDAY PAY

1. <u>Purpose & Eligibility.</u> The agency has designated 12 days for observance of holidays. These holidays are granted with pay for eligible employees. Full time employees are eligible for holiday pay at a rate of 7.5 hours per holiday. Minimum full-time employees are eligible for holiday pay only if the holiday falls on a day that they are scheduled to work. Part time & casual employees are not eligible for holiday pay. To

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be eligible for Holiday pay, employees must either have preapproved vacation days, a medical slip from a doctor, or work their scheduled work days both before and after the holiday. Employees who are on leave without pay or other extended leaves do not qualify for holiday pay.

- 2. Designated Holidays. The following days are designated as holidays:
 - o New Year's Day
 - o Martin Luther King, Jr. Day
 - o Presidents' Day
 - Memorial Day
 - o Independence Day
 - Labor Day
 - o Veterans' Day
 - Thanksgiving
 - Day after Thanksgiving
 - o Christmas Eve Day
 - o Christmas Day
 - o New Year's Eve Day
- 3. <u>Scheduling</u>. In the event Veterans' Day, Christmas Eve, Christmas Day, New Year's Eve Day, New Year's Day and/or Independence Day fall on Sunday the following Monday is recognized as an agency holiday. If an aforementioned holiday falls on Saturday, the preceding Friday is recognized as an agency holiday. If two holidays are observed together, and one or both fall on the weekend, the Agency will try to mirror its holiday observances with our fiduciary, Branch County.
- 4. <u>Rate of Payout</u>. Holiday days will be paid out at the employee's pay rate at the time of the holiday.
- 5. Compensation for a Holiday Worked: Employees (including supervisors) required to work during an agency designated holiday shall be compensated at one and one-half times the current rate of pay for the time worked in accordance with the additional time policy. Eligible employees will also receive holiday pay. Employees must receive prior approval from their division director before working on a holiday.
- 6. Loss of Holiday Pay: An employee who fails to qualify for holiday pay must take any available paid time off. If no paid time off is available, accruals and benefit withholdings will be adjusted accordingly.

SECTION 7: TERMINATION PROCEDURES

A. RESIGNATION

Resignation is a voluntary act initiated by the employee to discontinue employment with the agency. All employees should give at least ten (10) working days, but where possible twenty (20) working days, written notice of their intention to terminate employment with the agency. All employees that are ending their employment with this Agency must inform the Administration division so that all necessary paperwork can be completed prior to their resignation.

B. DISCHARGE

Discharge is a non-voluntary act initiated by the employer to discontinue the employment of the employee with the agency. Any employee may be discharged by the immediate supervisor, provided notification is given to the Health Officer and provided the steps of progressive discipline have been followed.

C. LAYOFF

Layoff is a non-voluntary act initiated by the employer to discontinue the employment of the employee with the agency for non-disciplinary reasons. Employees may be laid off for the lack of sufficient work or funds. Employees shall be laid off and recalled according to seniority within their service division. Employees on layoff may bump into a position for which they are qualified and trained that is held by a person with less seniority within their service division.

Employees who are notified of a layoff may appeal the decision of layoff utilizing the Grievance Procedure outlined in Section 8 of this manual.

D. FURLOUGH DAYS

As a result of unforeseen or unplanned budgetary deficiencies, the Health Officer may order that furlough days be taken by employees. An employee required to take a furlough day does not report to work that day and does not receive any payment for that day. When an employee is taking a required furlough day they will accrue the same benefits and seniority as when they are on a paid leave. The employee will not be able to use sick leave when taking a required furlough day.

E. JOB ELIMINATION

Job elimination is a management action taken to address a chronic and seeming permanent situation of lack of sufficient work or funds. Employees whose jobs are eliminated are not entitled to bumping rights. Employees who are notified of a job elimination may appeal the decision of job elimination utilizing the Grievance Procedure outlined in Section 8 of this manual.

F. RETURN OF AGENCY PROPERTY

Employees are responsible for all agency property and materials issued to them or in their possession or control. Employees must return all agency property and materials immediately upon request or termination. Where permitted by applicable laws, the agency may withhold from the employee's check or final paycheck the cost of any items that are not returned when required.

G. RESIGNATION IN GOOD STANDING

To resign in good standing an employee must meet all of the conditions listed below:

- 1) Meet with their immediate supervisor and agree to a written plan, acceptable to the Agency for transitional staffing of their position.
- 2) Submit a letter of resignation in accordance with "A" above
- 3) Be eligible for re-hire, or retirement, and have no pending or unresolved disciplinary or grievance issues.
- 4) Work the entire notice period other than pre-approved days off or holidays.

SECTION 8: PROGRESSIVE DISCIPLINE, AND GRIEVANCE AND APPEAL PROCEDURES

A. PROBLEM RESOLUTION STATEMENT

The Branch-Hillsdale-St. Joseph Board of Health is committed to providing the best possible working conditions for its employees. Part of this commitment is encouraging an open and frank atmosphere in which any work-related problem, complaint, suggestion, or question receives a timely response from management.

Not every problem, complaint, suggestion, or question can be addressed to everyone's total satisfaction, but through understanding and discussion, employees and management can develop confidence and trust in each other.

A pre-disciplinary meeting may be used when the Administrative Services Director has been made aware of a situation, action or behavior of an employee that could result in disciplinary action against an employee. The immediate supervisor shall notify the Administrative Services Director as soon as possible when they become aware of a situation that may result in disciplinary action against an employee. The Administrative Services Director shall request, in writing, and within five (5) days of the alleged situation, that a pre-disciplinary meeting be scheduled with the immediate supervisor and employee. Within the request, the Administrative Service Director shall schedule the date, time, and location of the meeting and state the nature of the allegation(s). The employee may bring a personal representative to the meeting. The Administrative Services Director will act as the mediator of the meeting. If the situation is not resolved, the supervisor will continue with the steps listed in the next section (Progressive

Discipline). In the event the Administrative Services Director is also the Supervisor; the Health Officer will appoint another director as mediator.

Where appropriate, the following progressive discipline policy and grievance and appeal procedures are superseded by applicable state laws and rules as further outlined in B(4).

B. PROGRESSIVE DISCIPLINE

- 1. <u>Purpose</u>. The purpose of this policy is to promote the equitable and consistent administration of discipline for unsatisfactory work performance and behavior in the workplace.
- 2. <u>Types of Disciplinary Action</u>. Disciplinary action may call for any five steps oral reprimand, written warning, suspension without pay, demotion or dismissal. Disciplinary action taken will be dependent on the severity of the problem and the number of occurrences.

Oral Reprimand – This is an action taken by the immediate supervisor in which he/she tells an employee about an action or behavior of the employee which he/she as the immediate supervisor find objectionable and/or wishes corrected. This action must be done in a private setting. The Oral Reprimand is an informal action only for the employee's benefit and is not relevant to Group I, II, or III Offenses as defined below.

Written Warning – This is an action taken by the immediate supervisor in which the supervisor writes out the action or behavior which the supervisor wishes the employee to change, cease, or begin. The written warning must describe in detail the behavior to be corrected, and must give direct and concrete orders for the future, and must point out the consequences of non-compliance with the Written Warning.

Suspension Without Pay – This is an action taken by the immediate supervisor which removes the employee from the workplace and payroll for a definite period of time. The reason(s) for the suspension must be in writing. The employee does not accrue salary, vacation or sick leave credit during the time of suspension, nor can the employee use such leave time while on suspension. At the end of suspension, the employee returns to the same salary and benefit conditions that existed prior to the suspension.

Demotion – This is an action taken by the immediate supervisor which reduces an employee's classification to a classification with a lower minimum salary. The reason(s) for the demotion must be in writing. The employee's salary must be reduced to fall within the range of the new, lower classification, but no lower annual step designation than the one held in the higher classification. The employee's job duties and responsibilities must be reduced to those of the new, lower classification.

Dismissal – This is an action taken by the immediate supervisor which permanently removes an employee from agency employment. The reason(s) for the dismissal must be in writing. Dismissed employees shall leave the premises at the time of dismissal and will be reimbursed for time remaining in the day. Dismissed employees shall be paid for all unused vacation leave that has been earned through the last day of work through a lump sum pay off. Dismissed employees shall not be entitled to any form of 'severance pay'.

3. Group Offenses. Examples of behavior that would be cause for disciplinary action are provided below. These examples are divided into three groups of offenses. Guidelines for administering discipline are set forth within each of these groups and the immediate supervisor shall follow these guidelines when dealing with the types of behavior described.

GROUP I OFFENSES include,

- Habitual tardiness at the beginning of a work day or after lunch (Habitual shall be interpreted to mean two instances in one month without sufficient reason, as determined by the immediate supervisor.)
- Excessive absenteeism, which includes but is not limited to absenteeism
 without sufficient reason, without proper notification, or in excess of accrued
 time off
- Disregard of safety rules or common safety practices
- Abuse of break time
- Use of profanity or obscene language in the presence of fellow employees or the public
- Quarreling with fellow staff members on the premises.
- Inefficient use of work time
- Any other offenses of like consequences

The disciplinary procedure in this group shall be: 1st offense, written warning; 2nd offense, one-day suspension without pay, 3rd offense, three-day suspension without pay; 4th offense, seven-day suspension without pay, 5th offense, dismissal. The violations shall be cumulative for a period of not more than one year.

GROUP II OFFENSES, include

- Injurious or dangerous pranks
- Physical fighting on the premises
- Faulty work and/or covering up faulty work
- Making or publishing of false and vicious and/or malicious statements concerning a fellow employee
- Abuse of the public, either verbal or physical

- Willful disobedience to the proper directive of a supervisor, or other acts of insubordination
- Consumption of any alcoholic beverages during work hours
- Intentionally accessing or discussing patient information for purposes other than the care of the patient or other authorized purposes but for reasons unrelated to personal gain or other breaches of privacy by negligence
- Supervisor dating direct report
- Violation of the agency's Social Media Policy
- Any other offenses of like consequences

The disciplinary procedure in this group shall be: 1st offense, three-day suspension without pay, 2nd offense, seven-day suspension without pay, 3rd offense, dismissal. The violations shall be cumulative for a period of not more than two years.

GROUP III OFFENSES, include

- The misuse or removal from the premises, without prior authorization, of any agency records, confidential information, or of any agency property, except as necessary in the performance of the employee's job duties and responsibilities
- Theft of any property belonging to a fellow employee, a customer, or the agency
- Knowingly falsifying any time slip or other payment voucher, or intentionally giving false information to anyone whose duty it is to make such records
- Absence of three consecutive workdays without notice and without justifiable reason for the failure to report
- Using delegated job responsibilities in an unlawful manner to gain unfair advantage against a fellow employee or the public
- Intentionally accessing or discussing patient information for personal gain or with malicious intent
- Listing on the CPS Registry, Sex Offender Registry, or Criminal Background check failure
- Sexual harassment, sexual misconduct, domestic violence, and/or dating violence
- HIPAA violation
- Any other offenses of like consequences.

The disciplinary procedure in this group shall be up to and including immediate dismissal.

4. <u>Exceptions for Severity.</u> There are certain types of employment problems that are serious enough to justify either a three-day suspension, or, in extreme situations, dismissal from employment, without going through the normal progressive discipline

steps.

5. <u>Suspension with Pay</u>. It may be necessary to separate an employee from the workplace while an investigation of an allegation against the employee is taking place. At such times, the employee will be placed on suspension with pay pending the investigation. The employee will retain all other fringe benefits during this time.

C. GRIEVANCE AND APPEAL PROCEDURES

1. <u>Purpose</u>. The purpose of this procedure is to provide a method for complaints to be voiced in an orderly manner such that the proper authorities can resolve such matters fairly and in a timely manner.

This procedure outlines for employees and management the proper steps involved when employees believe that there has been:

Alleged violations or misinterpretation of agency policies but not limited to such matters as conditions of employment, promotion, demotions, dismissals, and layoffs, and a claim of discipline without just cause; and

Alleged discrimination due to political opinion or affiliation, religious opinion or affiliation, gender, race, color, national origin, age, or physical disability.

- 2. <u>Content of the Grievance</u>. The content of the grievance shall include the following:
 - Who is the grievant?
 - What specific event occurred?
 - When did it happen?
 - Where did it happen?
 - What sections(s) of the Personnel Policies have allegedly been violated?
 - What adjustments or corrections are requested for each alleged violation?
- 3. Representation. The grievant may elect to have one representative of their choice at any step in the grievance and appeal procedure. The representative must be an employee of the agency. The name of the representative attending the grievance or appeal proceeding shall be submitted to the agency's Administrative Services Director at least two (2) working days prior to the hearing date. The grievant and one representative, shall be granted the necessary and reasonable absence from work for the scheduled proceeding under this procedure without loss of pay or leave credits.
- 4. <u>Steps of a Grievance</u>. All grievances and appeals shall be initiated and processed in the following manner:
 - <u>Step 1</u>. Employee presents the issue in writing to their immediate supervisor within ten (10) workdays after the occurrence of the alleged incident. The immediate

supervisor shall respond in writing, to the employee within five (5) workdays of the initial written presentation of the issue.

Step 2. If the grievance cannot be resolved in Step 1, the employee has the option of submitting a written appeal to the Health Officer within five (5) workdays of receiving written notification from their immediate supervisor. The Health Officer shall confer orally with the employee within five (5) days of receiving the written appeal. The Health Officer shall respond back in writing within ten (10) workdays of receiving the written appeal. If the Health Officer is the immediate supervisor in Step 1 of the grievance process, skip directly to Step 3.

Step 3. -If the grievance cannot be resolved in Step 2, the employee has the option of submitting the written grievance to the Board of Health within five (5) workdays of receiving the Health Officer's written response. The Board of Health's Program, Policy and Appeals Committee shall schedule a hearing with the employee at their next regularly scheduled meeting in order to review the grievance. The Program, Policy and Appeals Committee shall respond back in writing within five (5) days of hearing the grievance.

In addition to the internal grievance process, employees are able to file a complaint with the Michigan Department of Health and Human Services. The Human Resources department is required to report any civil rights grievances to the Michigan Division of Victim Services in a timely manner. See appendix A.

- 5. <u>Time Limitations</u>. Time for this grievance and appeal procedure shall be computed in terms of workdays, which are defined as Monday through Friday, excluding holidays. In the absence of a timely appeal by a grievant, the last decision at any step of the procedure becomes final. In the absence of a timely answer by any level of management, the grievant may appeal to the next step of the procedure within ten (10) workdays from the expiration of management's time for a decision. Time limits may be extended by mutual agreement in writing. Late appeals at any step may be filed upon showing a good cause for the delay.
- 6. <u>Appeal Hearing Procedure</u>. The appeal hearing is conducted so that the Board of Health's Program, Policy, and Appeals Committee can review pertinent facts and documents. Some guiding principles apply to the appeal hearing, including:
 - Prior to the appeal hearing, the entire appeal file shall be made available to the Committee and the grievant. The appeal file shall include the initial written grievance and all subsequent management written decisions.
 - Attendance at an appeal hearing is limited to persons determined by the Committee to have a direct connection with the grievance. When requested by the grievant, and the Committee does not object, the hearing may be open to the public.
 - As far as it is operationally possible, the agency must make its employees available as witnesses when requested.

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- The order in which the parties are heard is at the discretion of the Committee.
- Testimony shall be under oath or by affirmation; both the grievant and their representatives shall be given the opportunity to cross-examine all witnesses who appear to testify.
- A written record of the hearing shall be kept.
- Each member of the Committee shall have an equal vote. Decision shall be by majority vote.
- 7. Freedom from Reprisal. This procedure shall be available to employees and their representatives without restraint, interference, coercion, discrimination or reprisal. No employee of the agency, whether acting in an official capacity for the agency or any other basis, shall interfere with another employee's exercise of their rights under this procedure. No employee of the agency, whether acting in an official capacity employee or any other basis, shall take or threaten to take, any act of reprisal against another staff member because they have exercised, or expressed an intention to exercise any of these rights under this procedure.
- 8. <u>Group Grievances</u>. Employees having a common complaint may file a group grievance. The grievance shall be filed at the lowest step of the procedure involving a common level of supervision. Employees must choose one spokesperson and one representative of their choice.
- 9. <u>Appeal by External Applicant for Employment</u>. An external applicant for employment who is not selected may appeal the selection decision if they believe they were discriminated against because of political opinion or affiliation, religious opinion or affiliation, gender, race, color, national origin, age, or physical disability.

Such appeals shall be made in writing and directed to the health officer within fifteen (15) workdays following notification of non-selection. The health officer shall render a written decision within five (5) workdays of receiving an appeal. If the applicant is not satisfied with the written decision of the health officer, he/she may make a written appeal to the Board of Health's Program, Policy, and Appeals Committee. All appeal-hearing procedures outlined previously would then apply.

D. WHISTLEBLOWER POLICY

<u>Purpose:</u> The purpose of this policy is to further define and supplement the Agency's obligations under the Whistleblowers Protection Act, MCL 15.361, et seq.

<u>Authority:</u> Branch-Hillsdale-St. Joseph Community Health Agency Board of Health. Administrative policies shall be subject to revision or termination by the Board of Health at its discretion. This policy replaces and supersedes any prior policy on this subject matter.

<u>Application:</u> This policy applies to Board of Health Members and all Branch-Hillsdale-St. Joseph Community Health Agency employees. This policy does not apply to a

separate branch of government or co-employer that has its own policies covering the same matters covered in this policy.

<u>Responsibility:</u> The Administrative Services Director or designee shall be responsible for the administration and enforcement of this policy.

In support of this policy and in compliance with the Michigan Whistleblowers' Protection Act and certain federal statutes, it is the policy of the Branch-Hillsdale-St. Joseph Community Health Agency that no employee of the Agency will be discharged, threatened or otherwise discriminated against regarding compensation, terms, conditions, location or privileges of employment because that employee or a person acting on behalf of the employee reports or is about to report a violation or a suspected violation of federal, state or local laws or rules or regulations. Likewise, a violation of any state or federal law protecting an employee from retaliation for reporting violations or suspected violations of the law, is prohibited.

Any employee desiring to report a violation or suspected violation of law, may do so by reporting the same to their <u>dD</u>ivision Director, the Health Officer, or the Administrative Services Director/or <u>designee</u>.

SECTION 9: EMERGENCY-WEATHER-DISASTER POLICIES

A. BAD WEATHER POLICY

The Branch-Hillsdale-St. Joseph Community Health Agency offices shall remain open to provide services to consumers unless one of the following occurs:

- Employee receives a text message alert from the agency stating an office is closed. This should occur by 7:30 a.m.
- It is announced on the following local radio stations: WTVB in Coldwater, WCSR in Hillsdale, WBET in Sturgis, or WLKM in Three Rivers local radio station that an office is closed. This should occur by 7:30 A.M.
- The immediate supervisor informs employees that the local agency office is closed for the day due to weather. An employee who is uncertain of an office's status may contact their supervisor for clarification.

The Administrative Services Director is responsible for conferring with the Health Officer prior to 7 a.m. to determine whether an office shall be closed. When a determination is made to close an office, the Health Officer and Administrative Services Director, or their designee, will utilize the Staff text alert system. Staff are expected to reply to the text by texting "1" to indicate the message was received. The Emergency Call List will be used in the event of a failure within the texting system.

In the event an agency office is closed due to the weather, staff will be compensated at their normal pay rate unless they have already been granted approved leave time, either calling in sick or approved vacation time. Staff that have approved time off will be required to utilize their paid time off.

If an agency office is open, employees who are unable to report due to weather conditions may use annual vacation to be compensated. Employees must inform their immediate supervisor that they are unable to report due to weather conditions as soon as possible. Scheduled staff members are expected to use common sense and good judgment in determining their ability to report to work in bad weather.

B. BOMB THREAT PROCEDURE

When a bomb threat call comes in, the person receiving the call should remain calm and should cause no undue alarm.

The person receiving the call should do the following:

- 1. Write down the time the call was received and make notations, if possible, while still listening carefully.
- 2. If another person is available, notify them by passing a note that you have a bomb threat on the phone.

The second person should then do the following:

- a) Notify local law enforcement authorities by calling 9-1-1.
- b) Notify the person in charge: Health Officer, Administrative Services Director, or immediate supervisor
- 3. Keep the caller talking as long as possible. Do not hang up on the caller.
- 4. Try to find out where the bomb is supposed to be located. Try to pinpoint the area and time it is set to go off.
- 5. Try to find out something about the bomb, (size, type of explosives).
- 6. Record the time that the caller hangs up.
- 7. Try to write down or communicate as many specifics and facts that you can immediately after the call. This includes the caller ID number on your phone, any distinguishing voice characteristics, conversation details, and any background noises heard.
- 8. If you are alone when the call is received, follow the procedure outlined in 2 above as soon as possible after the caller hangs up.
- 9. If evacuation becomes necessary, this will be a decision of the Health Officer, Agency Directors, or other Supervisory staff present. If not the Health Officer, contact him/her as soon as possible.

C. DR. STRONG POLICY

Any employee who feels that he/she is being threatened or is in harm's way shall page on the overhead paging system: "Dr. Strong to (department or building area)." Employees hearing this page should immediately pick up the phone and dial 9-1-1. Employees hearing this page should <u>not</u> report to that specific location. Employees may choose to exit the building or shelter in place for safety. Once the threat is removed from the premises, return to the office gathering place (parking area, main lobby or conference room) for administration to confirm all employees are safe and accounted for.

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D. EMERGENCY CONTACT PROCEDURES

In the event of an emergency, or bio-terrorism event, the Agency's text alert system will be used. Employees are expected to text "1" back to the agency to confirm message was received. The Emergency Call Down list will be used in the event of a failure in the texting system. Documentation of employee contacts is made on the Emergency Contact List Documentation Log by the supervisor and forwarded to the Emergency Preparedness Coordinator. The log sheets are retained by the Emergency Preparedness Coordinator. Instructions will be given and employees are expected to follow them in the case of any emergency situation.

Any changes in an Employee's contact information or emergency contact information should be reported to the Administrative Services Assistant and Emergency Preparedness Coordinator.

E. FIRE ALARM EMERGENCY PLAN

When the fire alarm/smoke detector is activated everyone, employees and visitors, will leave the building and go at least 100 feet from the building. Staff are to call 9-1-1.

Visitors with disabilities will be assisted by Agency staff or family member/caregiver. An employee working with a visitor at the time of the alarm is responsible for the visitor's evacuation. Visitors in the lobby should be assisted and accounted for by the staff. If there is an elevator located in the office, no one is authorized to use it.

No one will re-enter the building until they are notified to enter. All cars parked near the entrance should be moved as soon as possible.

A Fire drill will be held once a year on a randomly selected day and time

F. LOCK DOWN POLICY

The Branch-Hillsdale-St. Joseph Community Health Agency takes the safety and security of our staff and clients very seriously. Circumstances may present themselves whereby the Agency must secure its doors and verify the identity of all those who enter. These circumstances may be related to incidents that happen within the Agency or possibly influenced by incidents (such as a prison escape) from outside the Agency. As it is our aim to serve our clients whenever possible we have developed a series of policies that will detail the Agency's actions during such emergencies

Lock Down Initiation

The decision to lock down a clinic or building will rest with the Health Officer, Agency Director(s), or Supervisor on site. Any employee who notices an incident or is aware of a

Page 44 Branch-Hillsdale-St. Joseph Community Health Agency – Personnel Policy – Approved by the BOH on April 25, 2024 threat to another employee or client, shall immediately make the information available to one of the above persons. Appropriate action will be taken and the doors to the building will be secured with staff posted to monitor the doors. If the decision is made by the Supervisor it shall be reported as soon as possible to the Health Officer or Administrative Services Director. These actions will be in effect until such time as the Health Officer or Administrative Services Director shall determine they are no longer appropriate. Circumstances that may initiate a lock down may consist of:

- Domestic violence threat to a client or staff member
- Workplace violence issue or threat
- Civil unrest within the community including protests and picketing of the Agency
- Prison or Jail escapes (mainly Coldwater or Hillsdale)

Lock Down Procedure (during business hours)

- Deal immediately with whatever issue has prompted the lock down and call the appropriate authorities.
- The staff member directing the lock down should remain calm as to dissuade panic among the staff or visitors.
- Secure all entry points into the buildings.
- Staff and visitors may be moved to an interior or more secure area of the building should the situation require it
- Post a staff member to monitor the entry points even if these points are not to be used to enter into the Agency office.
- All entry points to the Agency will be posted with a sign directing inquiries to a single entry point these signs will be available in the mail room of each office.
- If operations can continue, the person monitoring the designated entry point shall verify the identification and purpose of the person seeking admittance prior to their gaining entry.
- If we are unable to continue operations, a sign shall be posted at all entry points indicating that the Agency is closed and will re-open as soon as possible; we apologize for any inconvenience; please direct them to call the Agency phone number or consult our web site for further information.
- Regardless of which operational state we are in, Public Safety (Law Enforcement, Fire Department, and/or Emergency Medical Service) personnel will be admitted.

After Business Hours Lock Down

Our Agency is normally secured during our non-service hours; however, circumstances may present themselves which necessitate the Health Officer or Administrative Services Director to designate the building "locked down" until further notice. The Agency's text alerting system will be used to notify employees as soon as practical. Employees are expected to text "1" back to the agency to confirm message was received. The Emergency Call Down list will be used in the event of a failure in the texting system. In the event that staff are

already in route to work, or did not receive their text or call, they may find that one of the above lock down conditions exists. The Health Officer, Administrative Services Director, (their designee or Public Safety) should already be present and will direct the staff accordingly. It is important that staff maintain their Agency identification badge with them at all times so that they may be positively identified by whoever may be monitoring the entrance. If admitted to the building staff will be directed to a conference room where a briefing will take place to advise them of the situation

G. DISASTER INITIAL RESPONSE PLAN

The Agency is part of the National Disaster Framework, as such, we may be called up to support a local jurisdiction emergency, natural disaster, outbreak, or other. All employees are requested to maintain personal preparedness in order to mobilize agency resource as soon as possible. The following steps are followed in the event of an Agency emergency response request:

Notification

- Employees will receive notification of situation from; Agency text message, Agency email, MiHAN alert, Phone; or other
- Advise your family members of situation and make any arrangements necessary to cover the time you may be absent from your home
- Report to the stated location for assignment to your designated location

Assignment

- Report to the Incident Commander or their designee to sign in for duty
- Receive assignment and Job Action Guidelines for that assignment
- Receive the appropriate Identification badge, vest, or other such to designate your duty or position
- Read and understand the guidelines; ask any questions prior to reporting to your station
- Upon arrival at your station identify yourself to your supervisor; any further questions regarding your assignment may be answered at this time; be sure to understand the chain of command structure related to your assignment
- Upon reporting to your station, inventory and assess the condition of any equipment you will be responsible for operating, maintaining, or using during the incident. If you require further equipment or items that are missing from inventory, report this immediately to your supervisor for re-stocking or re-supply.
- Assignment of duty may be in an area of job responsibility outside of your normal daily duties. If you feel the duty is beyond your abilities, notify your supervisor for additional training or reassignment.

H. OFFICE CLOSURE PROCEDURE

In the event of circumstances, such as mechanical failures or loss of utilities, that may

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warrant closure of any Agency office(s), the Agency's text alerting system will be used to notify employees as soon as practical. Employees are expected to text "1" back to the agency to confirm message was received. The Emergency Call Down list will be used in the event of a failure in the texting system. Office closure is announced on the Coldwater, Hillsdale, Sturgis, and/or Three Rivers local radio. Employees assigned to that office will be notified if they are to be temporarily reassigned to another Agency office location. All other agency offices shall be notified of the situation and will continue normal operations.

I. ROBBERY POLICY

When a robbery threat is evident, remain calm and do the following:

- 1. Follow the instructions of the robber and do not try to intervene.
- 2. Give them whatever they demand.
- 3. Stay calm, and listen carefully and try to remember everything about the individual for future use.
- 4. Call 9-1-1 as soon as possible.

J. TORNADO EMERGENCY PLAN

In the event of a **Tornado Watch** the weather radio or local radio station will be monitored and regular operations will be maintained until a warning is issued.

In the event of a **Tornado Warning** the entire staff will evacuate to the inner corridor or the restrooms of the lowest level, avoiding the West and South walls.

- Close office windows and doors.
- Stay away from areas with windows and glass doors to avoid flying glass.
- Stay away from corners of rooms and small spaces to avoid debris.
- All persons will remain there until the warning is over.
- Visitors with disabilities will be assisted by Agency staff or family member/caregiver. An employee working with a visitor at the time of the warning is responsible for the visitor's evacuation to the shelter area. Visitors in the lobby should be assisted and accounted for by the clinic administrative staff. Visitors can not be forced to remain at the Agency's office, but they should be advised of the risk if they leave the facility.

The Clinic Administrative Assistant or EH Administrative Assistant will collect the sign-in/sign-out log and bring it to the evacuation location where employees will be accounted for. The sign-in/sign-out sheet will be evaluated to determine which staff are out working in the field.

Staff working in the field will be notified by the Agency's text alerting system as soon as practical. Employees are expected to text "1" back to the agency to confirm message was received or text "2" if they need assistance. The Emergency Call Down list will be used in

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the event of a failure in the texting system. Field staff are encouraged to seek shelter in a nearby home or building. If no structure is available, find the lowest lying area to seek cover.

A Tornado drill will be held once a year on a randomly selected day and time

K. UTILITY SHUT OFF PROCEDURES

Any employee who is notified that any area utility is going to shut down their services, at any time of the Agency's work day, must contact the Administrative Services Director . Information on the utility service, caller, and contact phone number should be obtained for the Administrative Services Director to contact. In the absence of the Administrative Services Director, contact the Health Officer. We do not want services interrupted during business hours unless it is an emergency or the utility company cannot fix the problem after Agency hours.

L. BURGLARY OR VANDALISM TO THE AGENCY

It is possible that an early arriving employee shall discover that a window is broken, door ajar, or other condition which may mean that building has been entered or is unsecured. This staff member shall report this immediately to 9-1-1 for action by Public Safety officials. Under no circumstances should a staff member or client be allowed to enter the building until it is cleared and secured by Public Safety officials.

If this condition is found after entering the building the staff member should immediately exit the building and call 9-1-1. The staff member should then notify the Health Officer or Administrative Services Director. Until the building has been cleared by Public Safety no staff or client should be allowed to enter.

SECTION 10: INFORMATION TECHNOLOGY POLICIES

A. COMPUTER USAGE & INTERNET POLICY

- **1. PURPOSE:** To ensure that the use of email and internet activities do not negatively impact the confidentiality, availability, integrity, and reputation of Branch-Hillsdale-St. Joseph Community Health Agency (BHSJ) and their assets and to ensure compliance with applicable federal and state laws. Any wired or wireless connecting to BHSJ network falls under this policy.
- **2. PHILOSOPHY:** An authorized user's access to the Internet and/or email services for limited personal use is a privilege that, if not properly monitored and controlled, could result in harm to the organization or violations of certain federal and state laws. The primary use of these services is for business and clinical purposes and thus need be appropriately protected.
- **3. APPLICABILTY:** This standard applies to all BHSJ Covered Entities.
- 4. DEFINITIONS:

- 4.1. <u>Protected Health Information (PHI)</u>: Health information, including demographic information collected from an individual and created or received by a health provider, health plan, employer or health care clearinghouse that relates to the past, present, or future physical or mental health or condition of any individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual that identifies an individual or there is a reasonable basis to believe the information can be used to identify the individual and that is transmitted or maintained by electronic media or any other form or medium. PHI does not include individually identifiable health information in education records covered and protected by the Family Educational Right and Privacy Act and employment records held by a covered entity in its role as an employer.
- 4.2. <u>Sensitive Information or Data</u>: Data that should be kept confidential. Access to these data shall require authorization and legitimate need-to-know. It includes Protected Health Information, financial information, personnel data, trade secrets, and any information that is deemed confidential or that would negatively affect BHSJ if inappropriately handled.

5. POLICIES:

- 5.1. All email messages, documents, correspondence, and data obtained through BHSJ or BHSJ network resources are considered BHSJ property.
- 5.2. Users shall have no expectation of privacy on BHSJ computers, in email or internet use.
- 5.3. BHSJ may monitor messages and internet use without prior notice.
- 5.4. Users are responsible for reporting any suspected or confirmed violations of this policy to their supervisor or either the BHSJ IT staff.
- 5.5. Users shall not misuse their Internet privileges, i.e., spending excessive time on the Internet for non-work-related business or accessing inappropriate sites.
- 5.6. Users need to refrain from streaming music or radio due to excessive bandwidth on business or personal devices, connected wired or wireless. Refrain from use of sounds and visuals which might be disruptive to others.
- 5.7. Users shall delete chain and junk email messages without forwarding or replying to them. Electronic chain letters and other forms of non-business related mass mailings are prohibited.
- 5.8. Personnel shall not use BHSJ resources to view, record, or transmit materials which violate BHSJ policies. Inappropriate messages, pictures, and/or other visual images/materials include, but are not limited to:

- 5.8.1. **Fraudulent messages** Messages sent under an anonymous or assumed name with the intent to obscure the origin of the message.
- 5.8.2. **Harassment messages** Messages that harass an individual or group for any reason, including race, sex, religious beliefs, national origin, physical attributes, or sexual preference.
- 5.8.3. **Obscene messages** Messages that contain obscene or inflammatory remarks.
- 5.8.4. **Pornographic materials** This includes, but is not limited to pictures, audio/video files, literature, or newsgroups.
- 5.9. Users <u>shall not engage in spamming activities</u>. Electronic chain letters and other forms of non-business-related mass mailings are prohibited.
- 5.10. Users shall not photograph, post, or transmit patient images or information, electronically or otherwise, unless doing so is in accordance with an approved use or disclosure, and approved methods for doing so are utilized.
- 5.11. Users shall not share sensitive, restricted, or protected health information (PHI) to any cloud provider that has not been approved by the Information Technology Manager (including but not limited to Google Apps, DropBox.com, GoogleDocs, iCloud, etc.).
- 5.12. Personal email accounts shall not be used for official BHSJ business.
- 5.13. BHSJ reserves the right to block access to non-business-related material.
- 5.14. Email transmission of PHI, if necessary, shall be conducted with the highest level of security applied and only in situations where the email is necessary for the treatment of the patient, payment, and health care operations.
 - 5.14.1. For users of the BHSJ email system only: To send email transmissions over the Internet (outside the BHSJ networks), PHI and other sensitive information shall be encrypted. Email shall not be transmitted over the Internet from any other email system unless/until an encryption method is approved for that email system.
- 5.15. Users shall comply with all laws related to copyright, intellectual, and personal property.
- 5.16. Users shall check their email regularly and delete unneeded email.
- 5.17. Users <u>shall not knowingly download executable files</u> from the Internet without approval from the IT staff.
- 5.18. Users shall not knowingly enable anyone to gain unauthorized access or control of any device, application, or system to the data networks

- 5.19. For the BHSJ network, the use of any software or service that hides the identity of the user or the location of the user while using the Internet is prohibited (including but not limited to proxy bypass or anonymization networks such as Tor).
- 5.20. Users shall not utilize BHSJ passwords on any non-corporate systems (i.e., banking, personal email, etc.).
- 5.21. Users shall not circumvent BHSJ technical security controls.
- 5.22. Users shall not transfer restricted or sensitive information to an unencrypted or unapproved device. Any removable storage media assigned by the Agency to individuals, is the property of the Branch-Hillsdale-St. Joseph Community Health Agency. Removable storage media belonging to the Agency should never be used with other devices or equipment that is not owned by the Agency. Likewise, any removable storage media not belonging to the Agency should not be used with devices or equipment that are owned by the agency.
 - 5.22.1. Users shall notify IT staff immediately in the event of a removable storage media device is lost or stolen, or if the computer is damaged.
- 5.23. Users shall log off application, workstations, laptops, and devices after use.
- 5.24. Users shall not store restricted or sensitive information on non-BHSJ equipment such as personally-owned devices unless properly authorized to do so.
- 5.25. Users shall not provide personal or official BHSJ information solicited by unknown individuals or suspected phishing email or websites.
- 5.26. Users shall follow the same security policies at any alternate workplaces as those required on the BHSJ networks.
- 6. CONTACTS: For questions regarding the requirements, implementation, and enforcement of this standard, contact the Information Technology Staff.
- 7. ENFORCEMENT: Any user found to have violated this policy may be subject to disciplinary action, up to and including termination of employment or assignment, depending on the severity of the infraction. In addition, BHSJ may report the matter to civil and criminal authorities as may be required by law.

B. SOCIAL MEDIA POLICY

This policy covers the use of social media and social networks in the workplace by employees, and by employees outside the workplace. This Policy works in conjunction with, and down not in any way substitute or replace, the Agency's Internet, Electronic Communications, Technology, Harassment and Discrimination Policies.

"Social Media" covers all web-based applications that permit the sharing and collaboration of information via internet communities, social-networking sites, video-sharing sites, wikis, blogs and micro-blogs and others. The Agency has drafted the following policies and procedures to help employees understand the unique issues raised by this evolving communication tool.

- 1) The Agency is committed to providing an environment that encourages the use of computers and electronic information as essential tools to support the Agency's business. The Agency provides a computer system, with internet access, to its employees to enable them to communicate with each other and with the Agency's suppliers and customers in an efficient and cost-effective manner. The electronic communications systems and equipment that is the subject of this policy is owned or leased by the Agency and is provided to employees for their use in connection with their work. It is the responsibility of each employee to ensure that this technology, including the access of social media websites, is used in accordance with these policies.
- 2) This policy covers employees who participate in personal social media or other internet activities; it applies regardless of whether the conduct occurs during working or non-working time, and regardless of whether Agency equipment is used.
- 3) Employees should primarily use the Agency's electronic communications systems and equipment for business-related purposes. While occasional personal use of social media websites is permitted, while the employee is on lunch or breaks, such use should be limited to times when the employee is not required to be performing any duties for the Agency, when the use will not conflict with the use of the systems or equipment by any employee who desires to use it for business purposes, and may not in any event be used in a manner contrary to any of the provisions of this Social Media Policy or any other policies that cover electronic communications or workplace technology.
- 4) Employees may not use social media in a manner that compromises the confidentiality of the Agency's confidential or proprietary information, trade secrets or other sensitive information, including PHI.
- 5) Employees may not use social media in connection with or to support any business ventures, other than those of the Agency, during Agency work hours and/or with Agency equipment.
- 6) Employees must refrain from any online activities that could reasonably place the Agency in a negative light or negatively impact its reputation during Agency work hours and/or with Agency equipment.
- 7) Employees may not use or incorporate the Agency's name, logo, imagery, or derivatives thereof in their e-mail addresses, screen names, home pages, screen imagery or otherwise, absent the prior written approval of management.

- 8) If an Agency employee administers a social media profile that relates to an Agency department, the Agency owns that social media profile. The employee must provide the login and password information to the Administrative Services Director and the IT department.
- 9) Offensive, demeaning or disruptive messages are prohibited. This includes, but is not limited to, messages that are inconsistent with the Agency's policy concerning equal employment opportunity and its policy prohibiting sexual and other unlawful harassment. Under no circumstances may the Agency's systems or equipment be used to transmit foul, indecent, scandalous or improper information, via social media or otherwise. Moreover, the use of the Agency's electronic communications systems and equipment in support of political, religious or other controversial causes is an inappropriate use of the system. Additionally, offensive racial or sexual comments are expressly prohibited.
- 10) Employees should assume that regardless of any privacy settings on various social media platforms, social media is not private. Information becomes public the moment it is published on the internet. Employees should assume that co-workers and members of the Agency's management will see anything and everything posted online, and should act accordingly.
- 11) Employees should not expect that anything that is sent or received using the Agency's electronic communication systems and equipment is the employee's private property. Employees should not have any expectation of privacy with respect to those communications, whether communicated via social media sites or otherwise. The Agency may, from time-to-time, as it sees fit, monitor, review, intercept or gain access to communications employees initiate or receive on the Agency's electronic communications systems and equipment. Employees' use of the Agency's systems will constitute consent to such monitoring, reviewing, interception or access. The Agency may, but has no requirement to, provide notice, either before or after any review of communications.
- 12) Periodically, the Agency may obtain photographs, videos or other likenesses of its employees at Agency-related events, such as outings, holiday parties, and charitable events. If an employee does not want his or her photograph, video or other likeness recorded at such an event posted on the Agency's website, or any social networking site, the employee must inform the Administrative Services Department in writing.
- 13) Employees should refrain from making social media postings that could be considered as creating a hostile work environment, as harassing, or otherwise inappropriate or harmful to the agency. Concerns about job performance or other potential complaints against co-workers or supervisors must be handled through the appropriate channels and remain consistent with the Agency's policies.
- 14) As with all of its policies, the interpretation of the Social Media Policy is within the sole discretion of management and the Agency reserves the right to alter, amend,

- modify, revoke, suspend or terminate all or any part of this Social Media Policy, at any time, in its sole discretion, with notice to all employees via their Division Directors. Moreover, this policy in no way affects or alters an employee's at-will employment status.
- 15) If, at any time, an employee is uncertain about how to apply these policies and procedures or has any question about his or her participation in social media activities, the employee should contact the Administrative Services Director. Each employee bears his or her own personal responsibility to follow this policy and use good judgment with his or her social media activities. If an employee has any doubt whether online activities violate this policy, he or she should ask their Division Director before engaging in the conduct.
- 16) Employees have an affirmative duty to report to a supervisor, or director, any conduct that violates this Social Media Policy. In such circumstances, an employee should follow the same reporting procedures set forth in the Agency's harassment policy.
- 17) Any employee who violates this Social Media Policy shall be subject to discipline, as set forth in the agency's discipline policies..

SECTION 11: INFORMATION REQUESTS-HIPAA-CONFIDENTIALITY

A. FREEDOM OF INFORMATION REQUEST PROCEDURE

Any employee or department who receives a letter requesting information on medical records or environmental issues, must forward this request on to the Administrative Services Director who in turns okays the information to be given out or denied to that particular client. A copy is given back to the employee and one copy kept in central file for future referencing.

B. MEDICAL RELEASE PROCEDURE

Any questions regarding who a Medical Release form goes to, should always be directed to the Administrative Services Director. He/she will then send it on to have copies made and sent to the proper place and a copy of the release form will be made and put in to the clients file for future reference.

C. SUBPOENA PROCEDURE

Any subpoena sent to any employee of the Agency must be presented to the Administrative Services Director so that he/she may go over the document and make sure that all rules are followed in complying with the subpoena. It will be in turn given back to the employee and a copy kept in central file for future referencing.

D. CONFIDENTIALITY / SANCTION POLICY

Purpose

HIPAA has required the BHSJCHA to create privacy and security policies in order to fulfill our duty to preserve the confidentiality and integrity of client Protected Health Information (PHI). This policy applies to all Branch-Hillsdale-St. Joseph Community Health Agency (BHSJCHA) employees (regular or temporary), contractors, volunteers, students or other observers, and any others who have access to the BHSJCHA's Protected Health Information.

The purpose of this Confidentiality/Sanction policy is to ensure that employees have the necessary client health information to provide the highest quality care possible while protecting the confidentiality of that information to the highest degree, so that clients do not fear to provide information to our agency.

The BHSJCHA will not tolerate violations of these policies and standards, and such violations may constitute grounds for disciplinary action up to and including termination, professional discipline, and criminal prosecution.

Assumptions

Information will be collected from clients only for the purposes of providing services and for supporting the delivery, payment, integrity, and quality of those services.

Employees will use their best efforts to ensure the accuracy, timeliness, and completeness of data collected from clients. Entries in records will not be altered or destroyed, only amended.

Employees will treat all written, electronic, and verbal information about clients including financial, demographic, and lifestyle information as sensitive and confidential. Employees will recognize that some medical information is particularly sensitive, such as HIV/AIDS, mental health, developmental disability, alcohol and drug abuse, sexually transmitted disease, and communicable disease information. Disclosure of such information could severely harm clients, by causing loss of employment opportunities and insurance coverage, as well as the pain of social stigma. BHSJCHA employees will treat such information with additional confidentiality protections.

Security

Employees will make every effort to maintain confidentiality of written and electronic records by ensuring that only authorized staff will have access to this information during the workday. Protected Health Information will not be left unattended in areas where visitors or other clients may see it. Charts will be placed face down on counter areas and facing the wall in bins so names are not visible, and computer screens will be turned so clients cannot see them. Schedules should not be located where clients or unauthorized persons may view them. Sign in sheets can be used, but should contain names only. All confidential records will be stored in locked areas when unattended. Records will be destroyed by shredding, in accordance with BHSJCHA record retention rules. Any

confidential information that is not a part of a permanent record (and is no longer needed) will be shredded, not thrown away in the regular trash.

Precautions will also be taken with electronic devices like computers, laptops, tablets, smart phones and flash drives. Devices will be password protected and locked when not in use, and security measures in place to protect from unauthorized viewing and theft.

If records are taken off site (with Supervisor or Director permission), special care must be taken to know the whereabouts of the records at all times. Staff must take precautions to prevent the access and viewing of these records by unauthorized persons. Paper records should be stored in a locked case or box for privacy and transported in the trunk of a vehicle if possible. Computers being taken off the premises for work should be off or locked when not in actual use. If computers are traveling in a vehicle, ideally, they should also be transported in the trunk. Both paper records in the locked case and computers must be removed from the car and taken with the employee when the employee leaves the car. A computer or paper records that are taken home (with Supervisor or Director permission) need to be kept in a locked home and not left in a vehicle overnight.

Privacy

Every effort should be made to ensure that confidential conversations remain private. Employees must use their best judgment to reduce the risk of unauthorized disclosures by closing doors or reception windows when on the phone or talking to a client, lowering voices, and meeting with clients in clinic rooms rather than in the halls or in waiting rooms.

Employees must also remember that the fact that a client chooses to obtain BHSJCHA services is in itself confidential information. We see many clients out in public during working hours and in our off-work hours. Employees should not acknowledge verbally in public awareness that a client may obtain services at the BHSJCHA. A client has the right to announce that they come to the BHSJCHA for services if they choose. We do not have a right to discuss their visit to the BHSJCHA without their permission.

Minimum Necessary

The BHSJCHA will make all reasonable efforts not to use or disclose more than the minimum amount of Protected Health Information necessary to accomplish the intended purpose. See the Minimum Necessary Policy for further information.

Receiving Confidential Information

Incoming mail is sorted daily and distributed. To protect privacy, confidential information that is received will be placed in envelopes or stapled closed prior to placing in the individual mailboxes.

Incoming confidential faxes will be received and stored in a secure area where clients have no access. They will be separated for delivery to individuals so confidentiality is maintained.

Incoming confidential information delivered by courier services must be distributed to the appropriate staff in an envelope to protect privacy, and stored in a secure area until it is reviewed.

Uses and Disclosures of Protected Health Information

The HIPAA Privacy Act allows the BHSJCHA to use and disclose Protected Health Information for purposes of treatment, payment and health care operations without authorization. Even without specific client consent, we are required to limit such uses or disclosures to the minimal amount of PHI that is reasonably required to provide these services.

Disclosures also permitted without client authorization include the following:

- Those required by law or for law enforcement purposes
- For public health activities, including communicable disease follow-up
- For reporting regarding victims of abuse, neglect, or domestic violence
- For health oversight activities

Clients must give authorization to disclose their Protected Health Information for specific purposes, which are generally other than treatment, payment or health care operations, or to disclose their confidential information to a third party specified by a client. Client authorization is also required to disclose psychotherapy notes to another entity. Psychotherapy notes are those notes of a health professional used to analyze contents of a conversation during private, joint, or group counseling session. Psychotherapy notes do not include any information that is kept in a patient medical record. For further clarification of psychotherapy notes please consult html.gov/html/health/

Disclosure of PHI is on a "need to know" basis, in that only the information that is necessary to accomplish the purpose is disclosed. Documentation of what PHI is disclosed, as well as when and to whom it is disclosed is recorded in the client's medical record.

Further detail about the uses and disclosures of Protected Health Information can be found in the HIPAA Manual where specific policies are located including Release of Information, E-mail, Fax, and Texting. All BHSJCHA employees are required to be familiar with these policies. Any questions about the uses and disclosures of Protected Health Information should be directed to a Supervisor or Director.

Sanctions

Any employee of the BHSJCHA, who believes another employee has breached the facility's security or privacy policies, or otherwise breached the integrity or confidentiality of client or other sensitive information, should immediately report such a breach to a Supervisor or Director.

The Health Officer and Directors will convene a committee to conduct a thorough and confidential investigation into the allegations. The BHSJCHA will not retaliate against or permit reprisals against a complainant. Allegations not made in good faith, however, may result in discharge or other discipline.

Disciplinary action will follow the policy outlined in the BHSJCHA Personnel Policies. The degree of discipline is a discretionary decision which management will make based on the nature of the offense, the employee's history, and other facts and circumstances deemed relevant. Disciplinary actions may include:

- Verbal warning
- Written warning
- Suspension
- Termination of employment

The BHSJCHA will follow the guidelines in the Personnel Policy manual to determine if a breach has occurred, the severity of a breach and the resulting sanctions recommended for the person involved in a breach.

Violation of the facility's security or privacy policies and standards may constitute a criminal offense under HIPAA, other federal laws such as the Federal Computer Fraud and Abuse Act of 1986, 18 U.S.C.1030, or state laws. Any employee who violates, or is reasonably suspected of having violated, such a law may expect that the BHSJCHA will provide information concerning the violation to appropriate law enforcement personnel and will cooperate with any law enforcement investigation or prosecution.

Further, violations of the BHSJCHA security or privacy policies and standards may constitute violations of professional ethics and be grounds for professional discipline. Any individual subject to professional ethics guidelines and/or professional discipline should expect the BHSJCHA to report such violations to appropriate licensure/accreditation agencies and to cooperate with any professional investigation or disciplinary proceedings.

All employees (regular or temporary), contractors, volunteers, students, or other observers with the BHSJCHA must follow this policy and are required to sign a Confidentiality Statement. Violation of this policy is grounds for disciplinary action, up to and including termination of employment. According to HIPAA rules, a person who knowingly obtains, misuses, or discloses Protected Health Information may incur criminal penalties that include a fine of not more than \$50,000 and/or imprisonment of not more than 1 year. If the offense is "under false pretenses," a person may incur a fine of not more than \$100,000 and/or imprisonment of not more than 5 years. If the offense is with intent to sell, transfer, or use Protected Health Information for commercial advantage, personal gain, or malicious harm, a fine of not more than \$250,000 and/or imprisonment of not more than 10 years may occur.

This Confidentiality/Sanction Policy is intended as a guide for the efficient and professional performance of employees' duties to protect the integrity and confidentiality of Protected Health Information. All employees, contractors, volunteers, students, and other observers with the BHSJCHA are expected to comply and cooperate with the facility's administration of this policy.

SECTION 12: SUBSTANCE ABUSE POLICY

The Branch-Hillsdale-St. Joseph Community Health Agency (the Employer) takes seriously the problem of drug and alcohol abuse. We are committed to provide a substance abuse free work place for our patients, clients, and employees. This policy applies to all employees of the Agency, without exception, including part-time, temporary, and on call employees, and volunteers.

POLICY:

- 1. No employee is allowed to consume any alcoholic beverage, marijuana product, or illegal/unauthorized drugs while performing his/her job duties for this Agency.
- 2. No employee may possess, sell or give to another any alcohol, <u>marijuana</u>, or drug, whether authorized or unauthorized, during assigned work time or while performing any services for the employer. This section shall not apply to employees who are authorized by law or job description to prescribe or dispense medication.
- 3. An employee may consume or possess authorized <u>prescription</u>, or <u>over-the-counter</u>, medications in the manner prescribed by the employee's physician or directed by the manufacturer.
- 5. The Employer will not tolerate employees who report for duty while impaired or under the influence of alcoholic beverages or unauthorized drugs.
- 6. All employees should report evidence of alcohol or drug abuse to a supervisor or a personnel representative immediately. In cases where the use of alcohol or drugs pose an imminent threat to the safety of persons or property, an employee must report the violation. Failure to do so could result in disciplinary action for the non-reporting employee.

DEFINITIONS:

1. Unauthorized Drug- Any drug that cannot be obtained legally or has been illegally obtained, including prescription drugs obtained without a prescription, prescribed or over the counter drugs used other than as properly instructed, and drugs sold or represented as being illegal. This definition includes, but is not limited to Amphetamines, Marijuana or Cannabinoids, Cocaine, Opiates, Phencyclidine, or any of their derivatives or metabolites.

The agency considers marijuana and cannabinoid products as unauthorized drugs because they are considered illegal under federal law.

- 2. Authorized Drug Prescribed drugs that are used as prescribed by a medical professional or over the counter drugs used as intended by the manufacturer.
- 3 Under the Influence For the purpose of this Policy, that the employee is either visibly affected by alcohol or an unauthorized drug, or a testing device or medical test or examination demonstrates any detectable amount of an unauthorized drug, alcohol or a metabolite of either, in the employee's blood, breath, urine or body.

VIOLATION OF THE POLICY:

- 1. Employees who violate the Substance Abuse Policy will be subject to disciplinary action, up to and including termination.
- 2. After a positive drug test, or upon reasonable suspicion that an employee has violated this policy, a pre-disciplinary hearing will be scheduled, in accordance with the Employer's Personnel Policies.
- 3. Any employee who suffers from drug or alcohol abuse may request employer assistance, before the occurrence of any misconduct or the commencement of disciplinary action. The employee may be eligible for referral to the Employee Assistance Program (EAP) or for a medical leave of absence. Employees with a problem are encouraged to contact the Human Resources Representative for details. Such requests are considered confidential. An employee referred to the EAP is not relieved from job expectation requirements. However, seeking assistance after disciplinary action has begun or is imminent will not preclude disciplinary action, up to and including termination.

DRUG TESTING:

As a part of our policy to ensure a substance abuse free workplace, employees may be asked to submit to a medical examination and/or tested for the presence of alcohol, marijuana, and/or drugs. The Employer reserves the right, at the employer's discretion, to examine and test for drugs, marijuana, and alcohol. Some such situations where testing may be requested may include, but not be limited, to the following circumstances.

- 1. All employees who are offered employment;
- 2. Where there are reasonable grounds for believing an employee is under the influence of alcohol, marijuana, or drugs;
- 3. As part of an investigation of any accident in the workplace in which there are reasonable grounds to suspect alcohol, marijuana and/or drugs contributed to the accident;
- 4. As a follow-up to a rehabilitation program;

- 5. As necessary for the safety of employees, patients, clients or the public at large, where allowed by statute;
- 6. When an employee returns to duty after an absence other than from accrued time off such as vacation or sick leave.

It is a condition of your continued employment that you comply with this Substance Abuse Policy.

Appendix A

Michigan Department of Health and Human Services Division of Victim Services Methods of Administration for Ensuring Division of Victim Services Subrecipients Comply with Applicable Federal Civil Rights Laws

The Michigan Department of Health and Human Services (MDHHS), Division of Victim Services (DVS), in cooperation with the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice (OCR), has developed a Method of Administration for ensuring that DVS subrecipient organizations who receive grant funds through DVS from the U.S. Department of Justice (Victims of Crime Act (VOCA) and Violence Against Women Act (VAWA)) and from U.S. Department of Health and Human Services (Family Violence Prevention and Services Act (FVPSA)) comply with applicable federal civil rights laws.

I. Policy for Addressing Discrimination Complaints

DVS has developed the written Program Discrimination Complaint Policies and Procedures and Employment Discrimination Complaint Policies and Procedures, comprehensive policies and procedures for receiving complaints from individuals who are receiving funded services at or are employees of a DVS subrecipient receiving funding grant funds from VOCA, VAWA, and FVPSA. DVS maintains an online, public copy of these policies, as well as a copy of the Methods of Administration and a downloadable Federal Civil Rights Complaint form that may be manually completed and forwarded to the MDHHS Equal Employment Opportunity (EEO) Officer, who serves as the Civil Rights Complaint Coordinator. The EEO Officer for the MDHHS is designated in the policy as the coordinating office for the civil rights compliance process. The EEO Officer must fully comply with Program Discrimination Complaint Policies and Procedures and the Employment Discrimination Complaint Policies and Procedures, pertaining to handling of complaints, and which establishes an orderly, efficient, and effective procedure for receiving, documenting, processing, and resolving complaints filed.

Civil Rights Compliant Coordinator
Equal Employment Opportunity Officer
Michigan Department of Health and Human Services
235 South Grand Avenue, Suite 708
P.O. Box 30037
Lansing, MI 48909
Phone: (517) 335-4722

Discrimination complaints should be forwarded to the EEO Officer, who shall also refer discrimination complainants in grant-funded services to the OJP's OCR. The EEO Officer will be available to assist individuals in completing the Program Discrimination Complaint Form and shall further forward complaints to the appropriate state or federal agency as appropriate. The EEO Officer will provide individuals with information about Employment Discrimination complaints.

The EEO Officer shall follow the program or employment discrimination complaint policies and procedures to respond to complaints. The EEO Officer shall send the complainant a letter acknowledging receipt of the complaint. The letter to the complainant will also notify the complainant from DOJ-funded (VAWA or VOCA) programs that he or she may also file a complaint with the OJP's OCR by submitting a written complaint to:

Office for Civil Rights,

Office of Justice Programs, U.S. Department of Justice

810 7th Street, N.W.

Washington, DC 20531

Phone: (202) 307-0690 TTY: (202) 307-2027 Fax: (202) 354-4380

https://www.ojp.gov/program/civil-rights/filing-civil-rights-complaint

II. Notification to Subrecipients of Civil Rights Requirements

Applicants for the VOCA, VAWA, FVPSA grant programs will be notified of their civil rights non-discrimination obligations and of prohibited discrimination. The grant agreement and attachments will include links to required federal and state award special conditions.

Subrecipients will annually certify their compliance in the DVS Annual Certifications Checklist, which includes federal civil rights obligations, including dissemination of information to project staff.

The Program Discrimination Complaint Policies and Procedures and Employment Discrimination Complaint Policies and Procedures are available on the grantee section of the Division of Victim Services website.

III. Protocol for Monitoring Subrecipient Compliance with Civil Rights-Related Award Requirements

Subrecipients will be required to complete the Annual Certifications Checklist, which will include federal civil rights obligations. In the Annual Certifications Checklist, subrecipients will also certify that they have notified or will notify all employees, clients, customers, and program participants that discrimination is prohibited.

Monitoring for the joint VOCA/VAWA/FVPSA-funded programs and VAWA-only programs will include standards reviews, and contract reviews which will confirm that subrecipients have the applicable policies and procedures in place to ensure compliance with federal civil rights laws and establish a process for employee and beneficiary complaints. These organizations' policies will be reviewed twice during a five-year period.

Monitoring for the VOCA-only programs will include contract reviews which will confirm that subrecipients have the applicable policies and procedures in place to ensure compliance with federal civil rights laws and establish a process for employee and beneficiary complaints. These organizations' policies will be reviewed twice during a during five-year period.

Subrecipients will be informed that all documentation should be made available to DVS upon request.

IV. Methodology for Training Subrecipients on Civil Rights-Related Award Requirements
At minimum, DVS will refer subrecipients to OJP OCR's Civil Rights Trainings and require that
the subrecipient's Civil Rights Contact complete the training at least once in the grant period.
The purpose of the training is to inform subrecipients on their responsibility for upholding the
civil rights laws and for observing non-discrimination obligations. All subrecipients are required
to certify in the Annual Certifications Checklist that they have received federal civil rights
training.

PUBLIC COMMENT

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